2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# N95000000490

Entity Name: ALANO BEACH CLUB, INC.

Current Principal Place of Business:

4615 GULF BLVD
SUITE 112
ST PETE BEACH, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

4615 GULF BLVD.,
SUITE 112
ST PETE BEACH, FL 33706 US

New Mailing Address:

FEI Number: 59-3240397 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, BRIAN E
7190 SEMINOLE BOULEVARD
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	FISHER, TINA	
Address:	940 BOCA CIEGA ISLE DRIVE	
City-St-Zip:	ST PETE BEACH, FL 33706 US	
Title:	DVP	( ) Delete
Name:	FISHER, DALE	
Address:	940 BOCA CIEGA ISLE DRIVE	
City-St-Zip:	ST PETE BEACH, FL 33706 US	
Title:	DS	( ) Delete
Name:	KIP, SALLY	
Address:	4450 GULF BLVD, #501	
City-St-Zip:	ST PETE BEACH, FL 33706 US	
Title:	DC	( ) Delete
Name:	CARLSON, SHANE	
Address:	919 SANDPIPER WAY SOUTH	
City-St-Zip:	ST PETERSBURG, FL 33707 US	
Title:	DT	( ) Delete
Name:	LUNDBECK, GORDON	
Address:	7427 4TH AVE., N	
City-St-Zip:	ST PETERSBURG, FL 33710 US	
Title:	DC	( ) Delete
Name:	KIP, PETER	
Address:	4450 GULF BLVD, #501	
City-St-Zip:	ST PETE BEACH, FL 33706 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TINA FISHER DP 04/21/2008

Electronic Signature of Signing Officer or Director — Date