

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000106807

FILED
Apr 09, 2009
Secretary of State

Entity Name: MCGREGOR POINT BRIDGE CLUB, INC.

Current Principal Place of Business:

15675 MCGREGOR BLVD
#1
FORT MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

15675 MCGREGOR BLVD
#1
FORT MYERS, FL 33908 US

New Mailing Address:

FEI Number: 65-0802593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COVALCIUC, RICHARD
15675-1 MCGREGOR
FORT MYERS, FL 33908 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: COVALCIUC, RICHARD
Address: 12601 MASTIQUE BEACH BLVD. #1103
City-St-Zip: FORT MYERS, FL 33908

Title: S () Delete
Name: COVALCIUC, VALERIE
Address: 12601 MASTIQUE BEACH BLVD. #1103
City-St-Zip: FORT MYERS, FL 33908

Title: S () Delete
Name: PEIFFER, ANNE
Address: 13200 TALL PINE CIR
City-St-Zip: FORT MYERS, FL 33907

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNE PEIFFER

S

04/09/2009

Electronic Signature of Signing Officer or Director

_____ Date