

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743682

FILED
Jan 20, 2009
Secretary of State

Entity Name: OCALA SINGLES CLUB, INC.

Current Principal Place of Business:

3632 NE 7TH ST.
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1288
SILVER SPRINGS, FL 34489

New Mailing Address:

FEI Number: 23-7434870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRIM, FRED J.
121 N.W. 3RD. STREET
OCALA, FL 32670 US

Name and Address of New Registered Agent:

KRIM, FRED
121 NW 3RD STREET
OCALA, FL 32670 US

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: FRED KRIM

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SNYDER, RUSS
Address: 14990 NE 202 PLACE
City-St-Zip: FORT MC COY, FL 32134

Title: 3VP () Delete
Name: STANLEY, JERRY
Address: 5501 SE 34TH COURT
City-St-Zip: OCALA, FL 34480

Title: 2VPD () Delete
Name: ALLEN, JOAN
Address: 3920 SW 30TH ST LOT A-14
City-St-Zip: OCALA, FL 34472

Title: S () Delete
Name: HALL, LYDIA
Address: 3443 NE 10TH ST
City-St-Zip: OCALA, FL 34470

Title: T () Delete
Name: WIEDERHOLD, GRACIE
Address: P.O. BOX 753
City-St-Zip: HERNANDO, FL 34442

Title: AST () Delete
Name: DI CORCIA, GAIL
Address: 10350 SW 98TH AVENUE
City-St-Zip: OCALA, FL 34481

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARDNER, SUSAN PRESIDE
Address: 5010 SE 107TH PLACE
City-St-Zip: BELLEVIEW, FL 34420

Title: 1VP (X) Change () Addition
Name: DIXSON, BRUCE 1VP
Address: 04406 EDGEWOOD DRIVE
City-St-Zip: FRUITLAND PARK, FL 34731

Title: 2VPD (X) Change () Addition
Name: CARTY, JACKIE 2VP
Address: 8240 SE 21ST AVENUE
City-St-Zip: OCALA, FL 34480

Title: 3VP (X) Change () Addition
Name: CULTER, COOKIE 3VP
Address: 10736 SE 50TH AVENUE
City-St-Zip: BELLEVIEW, FL 34420

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: SUSAN GARDNER

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date