2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741886

FILED Apr 06, 2009 Secretary of State

Entity Name: WINTER PARK RACQUET CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

2111 VIA TUSCANY WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

PO BOX 2830 WINTER PARK, FL 32790

FEI Number: 59-0733013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERGUSON, GRADY J 2111 VIA TUSCANY WINTER PARK, FL 32789 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:

Floring Complete of Decision of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 WRIGHT, KENNETH
 Name:
 ARCKEY, RAYMOND R

 Address:
 1741 VIA GENOA
 Address:
 150 SHELL POINT WEST

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:
 MAITLAND, FL 32751

Title: DVP () Delete Title: DVP (X) Change () Addition Name: ARCKEY, RAYMOND R Name: GOLDSMITH, PAUL

Address: 150 SHELL POINT WEST Address: 2051 SHARON ROAD
City-St-Zip: MAITLAND, FL 32751 City-St-Zip: WINTER PARK, FL 32789

Title: DS () Delete Title: DS (X) Change () Addition

Name: COHEN JR., ROBERT Name: CHEEK, TRACY

 Address:
 640 MOJAVE TRAIL
 Address:
 1019 BYRN MAWR STREET

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 ORLANDO, FL 32804

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 SIMMONS, STEPHEN
 Name:
 STARKEY, KARLA

 Address:
 2310 FORREST ROAD
 Address:
 823 NICOMA TRAIL

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:
 MAITLAND, FL 32751

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: RAYMOND R. ARCKEY PD 04/06/2009