

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30791

FILED
Apr 01, 2009
Secretary of State

Entity Name: AUDUBON COUNTRY CLUB ASSOCIATION, INC.

Current Principal Place of Business:

625 AUDUBON BLVD
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

625 AUDUBON BLVD
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 65-0102934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE MENA, JOHN W
625 AUDUBON BLVD
NAPLES, FL 34110 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: TD () Delete
Name: MILLER, JAMES
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

Title: SD () Delete
Name: MUSE, KAREN
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

Title: VD () Delete
Name: CONRARD, HERB
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: LAKEFIELD, BRUCE
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: MEIER, CHARLES
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

Title: PD () Delete
Name: CANNON, FRANK
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: MCDONOUGH, MARK
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

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

Title: VD (X) Change () Addition
Name: JEFFREY, CHARLES
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

Title: PD (X) Change () Addition
Name: LAKEFIELD, BRUCE
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

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

Title: D (X) Change () Addition
Name: KAVANAGH, MICHAEL
Address: 625 AUDUBON BLVD
City-St-Zip: NAPLES, FL 34110

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: JOHN DE MENA

ACCT

04/01/2009

Electronic Signature of Signing Officer or Director

Date