

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 721957

**Entity Name:** PONCE INLET CLUB SOUTH, INC.

**Current Principal Place of Business:**

4799 SOUTH ATLANTIC AVENUE  
PONCE INLET, FL 32127

**Current Mailing Address:**

4799 SOUTH ATLANTIC AVENUE  
PONCE INLET, FL 32127

**FEI Number:** 59-1551613

**Certificate of Status Desired:** No

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

BLACKWELL, HILDA CMGR  
4799 S ATLANTIC AVE  
106  
PONCE INLET, FL 32127 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            HITSCHER, KARIN  
Address        6 THROGGS NECK BOULEVARD  
City-State-Zip: BRONX, NY 10465

Title            VP  
Name            GOERGEN, JOHN  
Address        1030 HANGING VINE PL  
City-State-Zip: LONGWOOD, FL 32750

Title            ASEC  
Name            MARTIN, JOYCE B  
Address        4799 S. ATLANTIC AVE #208  
City-State-Zip: PONCE INLET FL 32127

Title            SEC  
Name            HADDAD, SHELLY  
Address        3924 LAKE SARAH DR  
City-State-Zip: ORLANDO FL 32804

Title            D  
Name            MCGUIRE, THOMAS D  
Address        5328 CARLINGFORT DR  
City-State-Zip: TOLEDO OH 43623

*I hereby 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 all other like empowered.*

**SIGNATURE:** KARIN HITSCHER

**PRES**

**01/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date