I hereby certify that the information indicated on this report or supplemental report is true and acc oath; that I am an officer or director of the corporation or the receiver or trustee empowered to ex		
above, or on an attachment with all other like empowered.		ioo, and that my name appears
SIGNATURE: CAROL CIALLELL-FELTEN	TRES. SEC.	04/10/2017

ı

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 761531 Entity Name: THE PHILLIPPI CREST CLUB, INC.

# **Current Principal Place of Business:**

2421 BURLINGTON LANE SARASOTA, FL 34231

#### **Current Mailing Address:**

SUSAN HICKS 2560 ARAPAHO STREET SARASOTA, FL 34231

## FEI Number: 59-6610112

Name and Address of Current Registered Agent:

FELTEN, CAROL H 2414 PORTLAND STREET SARASOTA, FL 34231 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	CAROL H. FELTEN			04/10/2017		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	PRES	Title	VP			
Name	HICKS, SUSAN	Name	HICKS, TOM			
Address	2560 ARAPAHO STREET	Address	2560 ARAPAHO STREET			
City-State-Zip:	SARASOTA FL 34231	City-State-Zip:	SARASOTA FL 34231			
Title	TREASURER, SECRETARY					
Name	FELTEN, CAROL					
Address	2414 PORTLAND STREET					
City-State-Zip:	SARASOTA FL 34231					

Certificate of Status Desired: No

04/10/2017 Date

FILED Apr 10, 2017 Secretary of State CC6406538306

## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT