

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 765229

Entity Name: ST. ANDREWS COUNTRY CLUB, INC.

Current Principal Place of Business:

17557 CLARIDGE OVAL WEST
BOCA RATON, FL 33496

Current Mailing Address:

17557 CLARIDGE OVAL WEST
BOCA RATON, FL 33496

FEI Number: 59-2000688

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SORENSEN, PATRICIA D
ST. ANDREWS COUNTRY CLUB, INC.
17557 CLARIDGE OVAL WEST
BOCA RATON, FL 33496 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 VP
Name IRWIN, STEVE
Address 17557 CLARIDGE OVAL WEST
City-State-Zip: BOCA RATON FL 33496

Title TREASURER
Name ALTSCHUL, LARRY
Address 17557 CLARIDGE OVAL WEST
City-State-Zip: BOCA RATON FL 33496

Title VP
Name GROSSBARD, ARTHUR
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL 33497

Title DIRECTOR
Name MILICH, ROBIN
Address 17557 CLARIDGE OVAL WEST
City-State-Zip: BOCA RATON FL 33496

Title PRESIDENT
Name GALLATIN, RONALD
Address 17557 CLARIDGE OVAL WEST
City-State-Zip: BOCA RATON FL 33496

Title COO
Name MARTIN, CRAIG COO
Address 17557 CLARIDGE OVAL WEST
City-State-Zip: BOCA RATON FL 33496

Title CFO
Name SORENSEN, PAT
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL 33437

Title VP
Name RICE, ED
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL 33496

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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: PAT SORENSEN

CFO

04/24/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SPEIER, JANYCE
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL 33496

Title VP
Name NEWMAN FRIEDMAN, ALICE
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR
Name SHERWIN, JON
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL

Title VP
Name LIEBMAN, ELLEN
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR
Name HOFFNER, RONALD
Address 17557 CLARIDGE OVAL
City-State-Zip: BOCA RATON FL 33496