2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05966

Entity Name: GLENEAGLES COUNTRY CLUB, INC.

Current Principal Place of Business:

7667 VICTORY LANE DELRAY BEACH, FL 33446

Current Mailing Address:

7667 VICTORY LANE DELRAY BEACH. FL 33446

FEI Number: 59-2465667

____, , , ___,

Name and Address of Current Registered Agent:

SPINA, KRAIG 7667 VICTORY LANE DELRAY BEACH. FL 33446 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

FILED Feb 24, 2016

Secretary of State

CC1876645114

Certificate of Status Desired: Yes

Officer/Director Detail:

Title PD Title VPD

NameWINER, RALPHNameNORTH, RICHARDAddress7667 VICTORY LANEAddress7667 VICTORY LANE

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: DELRAY BEACH FL 33446

Title2ND VICE PRESIDENTTitleTREASURERNameFINK, RONALDNameRUDO, SHIRLEYAddress7667 VICTORY LANEAddress7667 VICTORY LANE

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: DELRAY BEACH FL 33446

TitleASST. TREASURERTitleSECRETARYNameKAPLAN, DONALDNameGARE, RITA

Address 7667 VICTORY LANE Address 7667 VICTORY LANE

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: DELRAY BEACH FL 33446

Title ASST, SECRETARY Title DIRECTOR

NameBERKOWITZ, BARBARANameBENSON, DEBBIEAddress7667 VICTORY LANEAddress7667 VICTORY LANE

City-State-Zip: DELRAY BEACH FL 33446 City-State-Zip: DELRAY BEACH FL 33446

Continues on page 2

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: RALPH WINER PRESIDENT 02/24/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name FORMAN, NARDA

Address 7667 VICTORY LANE

City-State-Zip: DELRAY BEACH FL 33446

Title DIRECTOR

Name WOLK, STEPHEN

Address 7667 VICTORY LANE

City-State-Zip: DELRAY BEACH FL 33446

Title DIRECTOR
Name HOTZ, JUDY

Address 7667 VICTORY LANE

City-State-Zip: DELRAY BEACH FL 33446