

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49523

Entity Name: SPANISH AMERICAN CLUB, INC.**Current Principal Place of Business:**1150 SW CALIFORNIA AVENUE
PORT ST LUCIE, FL 34953**Current Mailing Address:**P.O. BOX 9356
PORT ST. LUCIE, FL 34985**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPANISH AMERICAN CLUB INC.
1150 SW CALIFORNIA AVENUE
PORT ST LUCIE, FL 34953 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	VPD
Name	ROZON, NANCY
Address	1362 SE JERICHO ROAD
City-State-Zip:	PORT ST LUCIE FL 34953

Title	SD
Name	BONET, MELISSA
Address	957 SW FENWAY ROAD
City-State-Zip:	PORT SAINT LUCIE FL 34953

Title	TR
Name	BRYSON, RONALD
Address	734 SE ESSEX DRIVE
City-State-Zip:	PORT ST. LUCIE FL 34984

Title	P
Name	BONET, CARLOS
Address	910 SW WORCESTER LANE
City-State-Zip:	PORT ST LUCIE FL 34953

Title	VC
Name	FELICIANO, AL
Address	1881 SE ERWIN ROAD
City-State-Zip:	PORT ST LUCIE FL 34953

Title	PR
Name	COLON, TONY
Address	1391 NW ST LUCIE WEST BLVD
City-State-Zip:	PORT ST LUCIE FL 34986

Title	ALTERNATE
Name	VALL DE RUTEN, FE
Address	1999 MARSH RABBIT LANE
City-State-Zip:	JENSEN BEACH FL 34957

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: RONALD D BRYSON**TREASURER****01/19/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date