

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51252

Entity Name: FISHER ISLAND CLUB, INC.**Current Principal Place of Business:**ONE FISHER ISLAND DR
FISHER ISLAND, FL 33109**Current Mailing Address:**ONE FISHER ISLAND DR
ATTN: ACCOUNTING DEPT.
FISHER ISLAND, FL 33109**FEI Number:** 65-0363916**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPCO, INC.
2699 S. BAYSHORE DRIVE
7TH FLOOR
MIAMI, FL 33133 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 DP
Name LOEB, JACK JR.
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title DVP
Name LORBER, HOWARD
Address ONE FISHER ISLAND DRIVE
City-State-Zip: MIAMI FL 33109

Title DS
Name AZOULAY, DANIEL
Address ONE FISHER ISLAND DRIVE
City-State-Zip: MIAMI FL 33109

Title DT
Name VALDES-FAULI, JOSE
Address ONE FISHER ISLAND DRIVE
City-State-Zip: MIAMI FL 33109

Title D
Name SNIDER, GARY
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title D
Name SOSA, ROBERTO
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

Title D
Name WIELHOUWER, DANIEL R
Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109

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: JACK LOEB, JR.

DP

02/05/2013

Electronic Signature of Signing Officer/Director Detail_____
Date