2008 NOT-FOR-PROFIT CORPORATION

FILED Apr 21, 2008 8:00 am Secretary of State

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1. Entity Nam	MENT #703205 E COUNTRY CLUB			04	-21-2008 90065 (049 ****6:	1.25
Principal Place of Business 7529 SAN JOSE BLVD JACKSONVILLE, FL 32217		Mailing Address 7529 SAN JOSE BLVD JACKSONVILLE, FL 32217					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01142008 Chg	-NP CR2E0	37 (12/06)	
City & State		City & State		4. FEI Number 59-0587258	3		plied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of Stat	tus Desired	\$8.75 Add Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Addre	ess of New Registered	Agent	
IRWIN, SCOTT R			Name				
	JOSE BLVD. VILLE, FL 32217		Street Add	dress (P.O. Box Number is No	ot Acceptable)		
	***		City		FL	Zip Code	е
	named entity submits this statement for ions of registered agent.	or the purpose of changing its re	egistered office or re	egistered agent, or both, in th	ne State of Florida. I am	familiar with,	and accept
SIGNATURE .							
0.0	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature i	required when reinstating)	DATE	_	
	. 10		Registered Agent signature	<u> </u>			
	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Col	paign Financing	\$5.00 May Be		k payable to	
10.	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make chec	rtment of St	tate
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing ntribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANGES PD OSTA, ROBE THE Granada	Make chec Florida Depa S TO OFFICERS AND D R TO Blud. S.	IRECTORS IN Change	tate
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DI PD COFER, CHARLES 1147 GREENRIDGE RD	9. Election Camp Trust Fund Cor RECTORS	arign Financing ntribution. 11. 11ILE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANGES PD OSTA, ROBE TO Granada Tacksonville	Make chec Florida Depa STO OFFICERS AND D RTO Blud . S. FL 322 (IRECTORS IN ☐ Change	tate 10 2 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR