

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703463

FILED
Jan 14, 2009
Secretary of State

Entity Name: HEINTZELMAN EMPLOYEE CLUB, INC.

Current Principal Place of Business:

2424 N JOHN YOUNG PKWY.
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

2424 N JOHN YOUNG PKWY.
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-6151228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOK, SHARON
2424 N JOHN YOUNG PKWY
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOOK, SHARON
Address: 2424 N JOHN YOUNG PKWY
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: WILSON, JOHN
Address: 2424 N JOHN YOUNG PKWY
City-St-Zip: ORLANDO, FL 32804

Title: D (X) Delete
Name: BROWN, JOSEPH
Address: 2424 N JOHN YOUNG PKWY
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: NIEDL, GARY
Address: 2424 JOHN YOUNG PKWY
City-St-Zip: ORLANDO, FL 32804

Title: D (X) Delete
Name: LOGAN, MIKE
Address: 2424 N JOHN YOUNG PKWY
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOHN WILSON

D

01/14/2009

Electronic Signature of Signing Officer or Director

Date