2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# 704784

Entity Name: REDLAND DISTRICT GOLF AND COUNTRY CLUB

Current Principal Place of Business:

24451 SW 177 AVE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 901268
HOMESTEAD, FL 33090 US

New Mailing Address:

FEI Number: 59-0761765 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOONCE, DAVID
19926 SW 326TH STREET
HOMESTEAD, FL 33030 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: BOWEN, LES
Address: 40 NE 15 ST
City-St-Zip: HOMESTEAD, FL 33030

Title: S ( ) Delete
Name: HARBIN, CAROL
Address: 17525 SW 245 TERR
City-St-Zip: HOMESTEAD, FL 33031

Title: T ( ) Delete
Name: FREDERICK, MICHAEL
Address: 17201 SW 290 ST
City-St-Zip: HOMESTEAD, FL 33030

Title: D ( ) Delete
Name: FACEY, ROBERT
Address: 8772 SW 214 TERR
City-St-Zip: MIAMI, FL 33189

Title: VPD ( ) Delete
Name: MARTINEZ, SAMUEL
Address: 14573 SW 161 CT
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: BAYS, MORGAN
Address: 1940 SW 242 TERR
City-St-Zip: HOMESTEAD, FL 33031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: BOWEN, LESLEY E
Address: 44 NE 16 ST
City-St-Zip: HOMESTEAD, FL 33030

Title: SD (X) Change ( ) Addition
Name: HUGHS, ROBERT J
Address: 2375 SE 5 CT
City-St-Zip: HOMESTEAD, FL 33033

Title: PD (X) Change ( ) Addition
Name: KOONCE, DAVID E
Address: 19926 SW 326 ST
City-St-Zip: HOMESTEAD, FL 33030

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

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

Title: D (X) Change ( ) Addition
Name: BUDD, EDWARD
Address: 377 N KROME AVE
City-St-Zip: HOMESTEAD, FL 33031

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: LESLEY E BOWEN TD 04/30/2009

Electronic Signature of Signing Officer or Director — Date