2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709471

Entity Name: TEQUESTA COUNTRY CLUB

FILED Feb 13, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
201 COUNTRY CLUB DR. TEQUESTA, FL 33469					
Current Mailing Address:			New Mailii	New Mailing Address:	
201 COUNTRY CLUB DR. TEQUESTA, FL 33469					
FEI Number: 59-0814422 FEI Number Applied For () FEI Number		FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ADAMS, MICHAEL C PD 1000 N U.S. HIGHWAY 1 T.H. 755 JUPITER, FL 33477 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	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD () E HARRIS, GEORG 1769 ARDLEY RI NORTH PALM BE	D JUNO ISLES	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ROGERS, WILLIA	BACK TERRRACE	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition TAYLOR, WILLIAM J 1 BAYVIEW COURT TEQUESTA, FL 33469 FL	
Title: Name: Address: City-St-Zip:	TD () E CURLEY, THOMA 10411 SE TERRA TEQUESTA, FL	APIN PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () E ADAMS, MICHAE 1000 N U.S. HIGH JUPITER, FL 349	HWAY 1	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ATD () E MARTIN, LINDA L 1542 JUPITER C JUPITER, FL 33-	OVE # 106	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () C CROWELL, WAL 42 GOLFVIEW D TEQUESTA, FL	DR .	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS J CURLEY TD 02/13/2007