

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709757

FILED
Jan 17, 2008
Secretary of State

Entity Name: THE DEFUNIAK SPRINGS COUNTRY CLUB, INC.

Current Principal Place of Business:

171 COUNTRY CLUB LANE
DEFUNIAK SPRINGS, FL 32435 US

New Principal Place of Business:

Current Mailing Address:

171 COUNTRY CLUB LANE
DEFUNIAK SPRINGS, FL 32435 US

New Mailing Address:

FEI Number: 59-1084115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, MARK D
10 E BALDWIN AVE
DEFUNIAK SPGS, FL 32433 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: PRES () Delete
Name: DUELL, TONY
Address: 1394 KINGS LAKE RD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: V () Delete
Name: OLIVER, JOHN
Address: 53 PATRICK DR
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: TRES () Delete
Name: MICHELS, DANIEL
Address: 45 CLYDE BROWN RD
City-St-Zip: PONCE DE LEON, FL 32455

Title: SEC () Delete
Name: WOODS, EVELYN
Address: 549 JUNIPER LAKE RD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: GM () Delete
Name: PARTRIDGE, PENELOPE
Address: 480 COUNTRY CLUB DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TRES (X) Change () Addition
Name: SMITH, SCOTT
Address: 123 GEORGIE ST
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: TONY DUELL

PRES

01/17/2008

Electronic Signature of Signing Officer or Director

Date