

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710098

FILED
Apr 17, 2009
Secretary of State

Entity Name: BUCKHORN SPRINGS GOLF AND COUNTRY CLUB, INC.

Current Principal Place of Business:

2721 S MILLER ROAD
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1254
VALRICO, FL 33595

New Mailing Address:

FEI Number: 59-1208774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONALD P. DECORT, P.A.
115 SOUTH FIELDING STREET
SUITE 3
TAMPA, FL 33606 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: P () Delete
Name: O'LOUGHLIN, SHARON A
Address: 3300 STARMOUNT DRIVE
City-St-Zip: VALRICO, FL 33594 US

Title: V (X) Delete
Name: POMEROY, BRIAN L
Address: 2718 WELCOME ROAD
City-St-Zip: LITHIA, FL 33547 US

Title: S () Delete
Name: ACKERMAN, THOMAS A
Address: 3621 SALLY PARRISH TRAIL
City-St-Zip: VALRICO, FL 33594 US

Title: T () Delete
Name: BOLEN, JACK
Address: 2217 BOXWOOD WAY
City-St-Zip: BRANDON, FL 33511 US

Title: D (X) Delete
Name: HOLM, OLAF M
Address: 2807 FAIRWAY VIEW DRIVE
City-St-Zip: VALRICO, FL 33594 US

Title: D (X) Delete
Name: CRAWFORD, JR., THOMAS
Address: 3906 FAIRLEA CIRCLE
City-St-Zip: PLANT CITY, FL 33566 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POMEROY, BRIAN
Address: 2718 WELCOME ROAD
City-St-Zip: LITHIA, FL 33547 US

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

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

Title: T (X) Change () Addition
Name: EADS, JEFF
Address: 1610 STATE RD 60 E
City-St-Zip: VALRICO, FL 33594 US

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: BRIAN POMEROY

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date