2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711548

FILED Mar 23, 2009 Secretary of State

Entity Name: NEW SMYRNA BEACH SHRINE CLUB HOLDING CORP., INC.

	Current Principal Place of Business:		New Principal Place of Business:	
	RANGE ST. YRNA BEACH, FL 32168 U	S		
Current N	lailing Address:	New Mailing	Address:	
	RANGE ST. YRNA BEACH, FL 32168 U	S		
FEI Number	r: 23-7361337 FEI Number Ap	plied For () FEI Number Not Applicat	ble () Certificate of Status Desired ()	
Name and	d Address of Current Registe	red Agent: Name and Ac	dress of New Registered Agent:	
100 INLET	TER, WALKER P JR 「SHORES DR. YRNA BEACH, FL 32168 U	S		
	e named entity submits this stat e of Florida.	ement for the purpose of changing its r	registered office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of	Registered Agent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/0	CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Delete BACHELLER, HERBERT E 2432 WOODLAND DR. EDGEWATER, FL 32141 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T () Delete CARPENTER, WALKER P JR. 100 INLET SHORES DR	Title: Name: Address:	() Change () Addition	
City-St-Zip:	NEW SMYRNA BEACH, FL 32168	3 US City-St-Zip:		
City-St-Zip: Title: Name: Address:	NEW SMYRNA BEACH, FL 32168 V () Delete BENTLEY, KENNETH 5201 S. ATLANTIC AV NEW SMYRNA BEACH, FL 32168	Title: Name: Address:	()Change()Addition	
	V () Delete BENTLEY, KENNETH 5201 S. ATLANTIC AV NEW SMYRNA BEACH, FL 32169 S () Delete KEMP, ROBERT D 633 YUPON ST.	Title: Name: Address: OUS City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	V () Delete BENTLEY, KENNETH 5201 S. ATLANTIC AV NEW SMYRNA BEACH, FL 32169 S () Delete KEMP, ROBERT D 633 YUPON ST.	Title: Name: Address: OUS City-St-Zip: Title: Name: Address:	., .	

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: W.P. CARPENTER, JR. T 03/23/2009