2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716113

FILED Jan 07, 2009 Secretary of State

Entity Name: SILVER SPRINGS RADIO CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 319 SE 26TH CT OCALA, FL 34471 **Current Mailing Address: New Mailing Address:** P.O. BOX 787 SILVER SPRINGS, FL 344890787 FEI Number: 59-2501600 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANTZ, JEANETTE 2801 SOUTHWEST COLLEGE ROAD, STE. 9 OCALA, FL 34474 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SWEENEY, EARL MILLER, WILLIAM Name: Name: 5995 NE 63RD STREET Address: 3381 SW 46TH AVENUE Address: City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: OCALA, FL 34474 Title: Title: () Change (X) Addition () Delete Name: Name: WOOD, HAROLD Address: Address: 2404 SE 39TH AVENUE City-St-Zip: City-St-Zip: OCALA, FL 34471 Title: () Delete Title: S/D () Change (X) Addition TOLLER, RON Name: Name: 8115 SW 76TH AVENUE Address: Address: City-St-Zip: City-St-Zip: OCALA, FL 34476 Title: () Delete Title: T/D () Change (X) Addition Name: Name: FREER, DON 1260 SE 65TH CIRCLE Address: Address: City-St-Zip: City-St-Zip: OCALA, FL 34472 Title: () Delete Title: () Change (X) Addition MOSS, RICHARD Name: Name: 8670C SW 97TH STREET, LOT 32 Address: Address: City-St-Zip: City-St-Zip: OCALA, FL 34476 Title: () Delete Title: () Change (X) Addition HARTSHORN, SCOTT Name: Name: Address: Address: 6917 SE 53RD PLACE OCALA, FL 34472 City-St-Zip: 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: DON FREER D/T 01/07/2009