

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716401

FILED  
Jan 16, 2009  
Secretary of State

**Entity Name:** ORMOND HOLIDAY CLUB ASSOCIATION, INC.

**Current Principal Place of Business:**

815 OCEAN SHORE BLVD  
APT 3  
ORMOND BEACH, FL 32176 US

**New Principal Place of Business:**

**Current Mailing Address:**

815 OCEAN SHORE BLVD  
APT 3  
ORMOND BEACH, FL 32176 US

**New Mailing Address:**

**FEI Number:** 56-0944005      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BALDRIDGE, BABETTE J  
815 OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176 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: D ( ) Delete  
Name: WALTERS, ROY  
Address: 480 WARNER TRAIL  
City-St-Zip: ENTERPRISE, FL 32725

Title: T ( ) Delete  
Name: COLLARD, DONALD  
Address: 11 LEVEL ACRES RD  
City-St-Zip: ATTLEBORO, MA 02703

Title: V ( ) Delete  
Name: KEMP, DAN  
Address: 815 OCEAN SHORE SUITE 8  
City-St-Zip: ORMOND BEACH, FL 32176

Title: S ( ) Delete  
Name: FALLAW, MARTHA  
Address: 5374 ASHLEY CT  
City-St-Zip: DUNWOODY, GA 30338

Title: D ( ) Delete  
Name: COOK, CHARLES  
Address: 4254 PEACHTREE DANWOODY RD  
City-St-Zip: ATLANTA, GA 30342

Title: P ( ) Delete  
Name: WILLIAMS, VIRGINIA  
Address: 449 26TH AVENUE  
City-St-Zip: SAN MATEO, CA 94403

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: D (X) Change ( ) Addition  
Name: GOUGH, JOHN  
Address: 145 GREENRIDGE DR  
City-St-Zip: HORSEHEAD, NY 14845

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: DAN KEMP

V

01/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date