

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719183

FILED
Jan 04, 2011
Secretary of State

Entity Name: FLORIDA GOLF COURSE SUPERINTENDENTS ASSOCIATION, INC.

Current Principal Place of Business:

475 NW SUN FLOWER PL
JENSEN BEACH, FL 34957

New Principal Place of Business:

939 NE JUNIPER PL
JENSEN BEACH, FL 34957

Current Mailing Address:

PO BOX 65
JENSEN BEACH, FL 34958

New Mailing Address:

FEI Number: 59-2506777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENNIFER INNES
475 NW SUN FLOWER PL
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

JENNIFER INNES
939 NE JUNIPER PL
JENSEN BEACH, FL 34957 US

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: JENNIFER INNES

01/04/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ES
Name: JENNIFER INNES
Address: 939 NE JUNIPER PL
City-St-Zip: JENSEN BEACH, FL 34957

Title: PRES
Name: MYERS, GARY
Address: PO BOX 10000
City-St-Zip: BUENA VISTA, FL 32830

Title: VD
Name: KANN, MARK
Address: 2556 WEST HIGHWAY 318
City-St-Zip: CITRA, FL 32113

Title: PPD
Name: KISTLER, WILLIAM
Address: 5811 TAMPA PALMS BLVD.
City-St-Zip: TAMPA, FL 33647

Title: STD
Name: MILLER, NANCY
Address: 2100 KINGS HIGHWAY
City-St-Zip: PORT CHARLOTTE, FL 33980

I hereby 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 all other like empowered.

SIGNATURE: JENNIFER INNES

ES

01/04/2011

Electronic Signature of Signing Officer or Director

Date