2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# 720227

Entity Name: HENDERSON CREEK CLUB, INC.

Current Principal Place of Business:

18 SONDERHEN CIRCLE
NAPLES, FL 339615207

New Principal Place of Business:

18 SONDERHEN CIRCLE
NAPLES, FL 34114

Current Mailing Address:

15 DERHENSON DR
NAPLES, FL 34114 US

New Mailing Address:

44 DERHENSON DR
NAPLES, FL 34114 US

FEI Number: 59-1398677 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINN, ANN
15 DERHENSON DR
NAPLES, FL 34114 US

Name and Address of New Registered Agent:

RUSSELL, MAX
44 DERHENSON DR
NAPLES, FL 34114 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: MAX RUSSELL 02/11/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: WRESNESKI, ED
Address: 6 CREEK CIR
City-St-Zip: NAPLES, FL 34114

Title: SEC ( ) Delete
Name: RUSSELL, MAX
Address: 44 DERHENSON DR
City-St-Zip: NAPLES, FL 34114

Title: T ( ) Delete
Name: QUINN, ANN
Address: 15 DERHENSON DR
City-St-Zip: NAPLES, FL 34114

Title: D ( ) Delete
Name: KOEHLER, DENNIS
Address: 25 CREEK CIR
City-St-Zip: NAPLES, FL 34114

Title: D ( ) Delete
Name: WALKLEY, PETE
Address: 13 CREEK CIR
City-St-Zip: NAPLES, FL 34114

Title: D ( ) Delete
Name: BERKOSKI, JOYCE
Address: 11 DERHENSON DR
City-St-Zip: NAPLES, FL 34114

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: ( ) 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: MAX RUSSELL SECR 02/11/2009
Electronic Signature of Signing Officer or Director Date