

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721116

FILED
Apr 29, 2009
Secretary of State

Entity Name: MAYACOO LAKES COUNTRY CLUB, INC.

Current Principal Place of Business:

9697 MAYACOO CLUB DRIVE
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

9697 MAYACOO CLUB DRIVE
WEST PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 59-1409381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORDHAM, ROBERT P SR
9697 MAYACOO CLUB DRIVE
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

LORI, CONTI
9697 MAYACOO CLUB DRIVE
WEST PALM BEACH, FL 33411 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: LORI CONTI

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KRASKER, PAUL
Address: 300 VALENCIA ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP () Delete
Name: EVELYN, KENNETH
Address: 1300 WOODROW WAY
City-St-Zip: WELLINGTON, FL 33414

Title: TD () Delete
Name: GIMSON, CURTIS
Address: 116 VIA PARADISIO
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SD () Delete
Name: CARTWRIGHT, CHARLES
Address: 756 GRANADA DRIVE
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EVELYN, KENNETH M
Address: 1300 WOODROW WAY
City-St-Zip: WELLINGTON, FL 33414

Title: VP (X) Change () Addition
Name: LEWIS, GREGORY H
Address: 1535 BREAKERS WEST WAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: TD (X) Change () Addition
Name: GIMSON, CURTIS S
Address: 116 VIA PARADISIO
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SD (X) Change () Addition
Name: MYERS, JAMES L JR
Address: 1249 BREAKERS WEST BLVD
City-St-Zip: WEST PALM BEACH, FL 33411

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: KENNETH M. EVELYN

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date