2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721547

Entity Name: CUB CLUB, INC.

FILED May 07, 2008 Secretary of State

Current Principal Place of Business: New Principal	Place of Business:
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605 DANLEY DR

BOX 10

FT. MYERS, FL 33907 US

Current Mailing Address: New Mailing Address:

605 DANLEY DR

BOX 10

FT. MYERS, FL 33907 US

FEI Number: 73-6501169 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

KIDDER, CHRISTOPHER 605 DANLEY DRIVE FORT MYERS, FL. 3390715

FORT MYERS, FL 339071556 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 VOORHEES, TERALD
 Name:
 GRAHAM, ERIC S

 Address:
 216980 SUMMER GREEN DRIVE
 Address:
 4113 NW 14TH ST

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 CAPE CORAL, FL 33993

Title: TR () Delete Title: () Change () Addition

 Name:
 KIDDER, CHRISTOPHER
 Name:

 Address:
 6890 CHEROKEE AVE
 Address:

 City-St-Zip:
 FORT MYERS, FL 33905
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 HOWARD, DENNIS
 Name:
 KIRCHNER, LARRY

 Address:
 5710 COMPASS CT
 Address:
 1517 SW 58TH ST

 City-St-Zip:
 CAPE CORAL, FL 33190
 City-St-Zip:
 CAPE CORAL, FL 33914

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: CHRISTOPHER S. KIDDER TR 05/07/2008