2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726900

FILED Apr 02, 2009 Secretary of State

Entity Nai	me: COMMOE	OORE CLUB WEST, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	N LANE DRIVE YANE, FL 3314					
Current Mailing Address:			New Maili	New Mailing Address:		
	N LANE DRIVE YANE, FL 3314					
FEI Number	: 59-1504497	FEI Number Applied For()	FEI Number Not App	Dicable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
121 ALHAI SUITE 100 CORAL GA The above	ABLES, FL 33°	134 US	ourpose of changing i	its registered office or registered agent, or both,		
SIGNATUI	RE:					
	Electron	ic Signature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	. ,		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S () VARKAS, ALEX 155 OCEAN LAI KEY BISCAYNE	NE DR., #311	Title: Name: Address: City-St-Zip:	T (X) Change () Addition VARKAS, ALEXANDER D JR. 155 OCEAN LANE DR., #311 KEY BISCAYNE, FL 33149		
Title: Name: Address: City-St-Zip:	T () SEGALLA, KAR 155 OCEAN LAI KEY BISCAYNE	NE DRIVE #609	Title: Name: Address: City-St-Zip:	S (X) Change () Addition SEGALLA, KAREN 155 OCEAN LANE DRIVE #609 KEY BISCAYNE, FL 33149		
Title: Name: Address: City-St-Zip:	, ,		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition SCHUMANN, PETER 155 OCEAN LANE DR #1112 KEY BISCAYNE, FL 33149		

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: FREDDY GOMEZ DE CORDOVA Ρ 04/02/2009