2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726945

Apr 23, 2009 Secretary of State

Entity Name: 53 ST. JOHNS RIVER CLUB ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2329 RIVER RIDGE ROAD DELAND, FL 32720

Current Mailing Address: New Mailing Address:

2329 RIVER RIDGE RD DELAND, FL 32720 US

FEI Number: 59-1560408 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ST JOHNS RIVER CLUB ASSOC., INC. ST JOHNS RIVER CLUB ASSOC., INC. C/O AMY WHITMARSH, CPA C/O AMY WHITMARSH, CPA 432 W NEW YORK AVE, STE K 432 W NEW YORK AVÉ, STE A DELAND, FL 32720 US DELAND, FL 32720 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: 04/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MILLS, RICHARD A HERBST, GEORGE Name: Name: 12609 AGATITERD Address: 1110 SW IVANHOE BLVD #113 Address:

City-St-Zip: JACKSONVILLE, FL 32251 City-St-Zip: ORLANDO, FL 32804

Title: () Delete Title: (X) Change () Addition HERBET, GEORGE Name: MARKHAM, JIM Name:

Address: 1110 SW IVAN HUE BLVD 13 Address: 2329 RIVER RIDGE RD #3 City-St-Zip: ORLANDO, FL 32804 City-St-Zip: DELAND, FL 32720

Title: () Delete Title: 2VP (X) Change () Addition GOLATZ, TOM MILLS, RICHARD Name: Name:

2329 RIVER RIDGE RD, # 15 Address: Address: 12609 AGATITE RD City-St-Zip: DELAND, FL 32720 City-St-Zip: JACKSONVILLE, FL 32258

Title: S/T () Delete Title: 3VP (X) Change () Addition

Name: MILLS, MARYLYNN Name: BURGER, RAYMOND 2329 RIVER RIDGE RD #11 Address: Address: 1610 SW 5TH AVE City-St-Zip: DELAND, FL 32720 City-St-Zip: POMPANO BEACH, FL 33060

Title: () Delete Title: () Change (X) Addition GOLATZ, MARLYS Name: Name: 4690 GREAT WESTERN LN S Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32257

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: AMY WHITMARSH RΑ 04/23/2009