

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730223

FILED
Apr 28, 2009
Secretary of State

Entity Name: SOUNDINGS YACHT AND TENNIS CLUB, INC.

Current Principal Place of Business:

10301 S.E. SOUNDINGS DRIVE
HOBE SOUND, FL 334751790

New Principal Place of Business:

Current Mailing Address:

10301 S.E. SOUNDINGS DRIVE
P.O. BOX 1790
HOBE SOUND, FL 334751790

New Mailing Address:

FEI Number: 59-1651162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, DEBORAH
759 S FEDERAL HWY, STE 212
STUART, FL 34994 US

Name and Address of New Registered Agent:

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:

Title: COM () Delete
Name: ROGERS, LAWRENCE
Address: 8545 SE GULFSTREAM PL
City-St-Zip: HOBE SOUND, FL 33455

Title: VC () Delete
Name: STEELE, WILLIAM
Address: 8631 SE SOUNDINGS FL
City-St-Zip: HOBE SOUND, FL 33455

Title: RC () Delete
Name: GERBER, GEORGE
Address: 8666 SE GULFSTREAM PLACE
City-St-Zip: HOBE SOUND, FL 33455

Title: S () Delete
Name: MEDLEY, SHEILA
Address: 8642 SE SOUNDINGS PLACE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: RICHEY, WILLIAM
Address: 8848 SE STAR ISLAND WY
City-St-Zip: HOBE SOUND, FL 33455

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: T (X) Change () Addition
Name: MOORE, NELSON
Address: 8937 SE STAR ISLAND WY
City-St-Zip: HOBE SOUND, FL 33455

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: LAWRENCE ROGERS

COM

04/28/2009

Electronic Signature of Signing Officer or Director

Date