2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# 732275

Entity Name: BENT PINE GOLF CLUB, INC.

Current Principal Place of Business:

6001 CLUB HOUSE DRIVE
VERO BEACH, FL 329674599

New Principal Place of Business:

Current Mailing Address:

6001 CLUB HOUSE DRIVE
VERO BEACH, FL 329674599

New Mailing Address:

FEI Number: 51-0198590 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MELLO, DOUGLAS J
8354 SEGO LANE
VERO BEACH, FL 32963 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:	P	( ) Delete
Name:	FRIESELL, WILLIAM H	
Address:	4725 PEBBLE BAY CIRCLE	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	VP	( ) Delete
Name:	KIELLLEY, JAMES E	
Address:	9037 SOMERSET BAY LANE # 302	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	S	( ) Delete
Name:	MELLO, DOUGLAS J	
Address:	8354 SEGO LANE	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	AT	( ) Delete
Name:	HAMMES, MICHAEL J	
Address:	311 LADY PALM TERRACE	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	D	( ) Delete
Name:	REISER, MATTHEW	
Address:	1218 WEST ISLAND CLUB SQUARE	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	D	( ) Delete
Name:	ALTHOFF, DAVID E	
Address:	12 CACHE CAY	
City-St-Zip:	VERO BEACH, FL 32963	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: WILLIAM H FRIESELL P 03/19/2009

Electronic Signature of Signing Officer or Director — Date