2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#734200

FILED Apr 09, 2009 Secretary of State

Entity Name: LANARK VILLAGE GOLF CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** LANARK VILLAGE CHILLAS HALL 156-A HEFFERNAN DRIVE LANARK VILLAGE, FL 32323 **New Mailing Address: Current Mailing Address:** P O BOX 1337 LANARK VILLAGE, FL 32323 US FEI Number: 59-1309253 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: MELOCHE, RONALD E MELOCHE, RONALD E 52-1 PARKER P O BOX 352 52-1 PARKER 156-A HEFFERNAN DRIVE 156-A HEFFERNAN DRIVE LANARK VILLAGE, FL 32323 US LANARK VILLAGE, FL 32323 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: 04/09/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MANZANARES, JOYCE Name: Name: Address: 662 E PINE ST Address: City-St-Zip: LANAK VILLAGE, FL 32323 City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: WALLACE, PHILIP N Name: GODBURN, WARD Address: 38-6 PINE ST Address: 2268 HWY 98 E City-St-Zip: LANARK VILLAGE, FL 32323 City-St-Zip: CARRABELLE, FL 32322 Title: () Delete Title: () Change () Addition CLARK, DOROTHY J Name: Name: 7-2 CAMELIA CT P O BOX 1352 Address: Address: City-St-Zip: LANARK VILLAGE, FL 32323 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition COURAGE, RAYMOND L Name: Name: Address: 126 CARL KING AVE Address: City-St-Zip: LANARK VILLAGE, FL 32323 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: JOYCE MANZANARES T 04/09/2009