

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734589

FILED
Apr 16, 2009
Secretary of State

Entity Name: MYERLEE COUNTRY CLUB, INC.

Current Principal Place of Business:

1380 MYERLEE COUNTRY CLUB BLVD.
FT. MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

1380 MYERLEE COUNTRY CLUB BLVD.
FT. MYERS, FL 33919

New Mailing Address:

FEI Number: 59-1461386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, PAUL
1380 MYERLEE COUNTRY CLUB BLVD
FT MYERS, FL 33919 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: DP () Delete
Name: COOPER, PAUL
Address: 7047 E BRANDYWINE CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: DVP () Delete
Name: DEUTSCH, LEO
Address: 1461 PALM WOODS DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: DT () Delete
Name: LESSILA, JAMES
Address: 1319 S BRANDYWINE CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: DS () Delete
Name: GOULD, NANCY
Address: 7012 FOXFIRE DRIVE
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change () Addition
Name: O'BRIEN, BARBARA
Address: 5776 BASS CIRCLE
City-St-Zip: FORT MYERS, FL 33919

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: PAUL COOPER

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

Date