

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735910

FILED
Jan 06, 2009
Secretary of State

Entity Name: MYAKKA PINES GOLF CLUB OF ENGLEWOOD, INC.

Current Principal Place of Business:

2550 S. RIVER RD
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 126
ENGLEWOOD, FL 34295

New Mailing Address:

FEI Number: 59-1735073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORTON, GEORGE
717 FRINGED ORCID TRAIL
VENICE, FL 34293 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: LONG, JOHN
Address: PO BOX 126
City-St-Zip: ENGLEWOOD, FL 34295

Title: S () Delete
Name: BORTON, GEORGE
Address: P.O. BOX 126
City-St-Zip: ENGLEWOOD, FL 34295

Title: T () Delete
Name: JENNETT, JAN
Address: P.O. BOX 126
City-St-Zip: ENGLEWOOD, FL 34295

Title: VP () Delete
Name: DEE, JOHN
Address: P.O. BOX 126
City-St-Zip: ENGLEWOOD, FL 34295

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MILLER, SKIP
Address: PO BOX 126
City-St-Zip: ENGLEWOOD, FL 34295

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

Title: T (X) Change () Addition
Name: MCCROSSIN, JAMES
Address: P.O. BOX 126
City-St-Zip: ENGLEWOOD, FL 34295

Title: P (X) Change () Addition
Name: DEE, JOHN
Address: P.O. BOX 126
City-St-Zip: ENGLEWOOD, FL 34295

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: GEORGE BORTON

S

01/06/2009

Electronic Signature of Signing Officer or Director

Date