## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 737913 Apr 15, 2009
Secretary of State

Entity Name: THE CENTURY CLUB OF CORAL GABLES, INC.

**Current Principal Place of Business:** New Principal Place of Business: 8500 SW 92ND STREET 145 MADEIRA AVENUE #202 #209 MIAMI, FL 33156 CORAL GABLES, FL 33134 US **Current Mailing Address: New Mailing Address:** 8500 SW 92ND STREET 145 MADEIRA AVENUE #202 #209 MIAMI, FL 33156 US CORAL GABLES, FL 33134 US FEI Number: 59-1720616 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: DAL PEZZO, LORELLA N WAHLSTROM, KIM P 8500 SW 92ND STREET 1107 GENOA STREET US #202 CORAL GABLES, FL 33134 MIAMI, FL 33156 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: KIM P. WAHLSTROM 04/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ZIMMER, MARK Name: Name: 9225 SW 68 STREET Address: Address: MIAMI, FL 33173 US City-St-Zip: City-St-Zip: Title: Title: () Change () Addition ( ) Delete LAMB, ALAN Name: Name: Address: 14325 SW 125 COURT Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SCHULTE, JAMES Name: MOORE, DONALD Name: 8072 SW 80TH AVE Address: Address: 814 MILAN City-St-Zip: MIAMI, FL 33143 US City-St-Zip: CORAL GABLES, FL 33134 US (X) Change ( ) Addition Title: SEC () Delete Title: BOWERS, JAMES Name: KING, RAYMOND Name: 13621 DEERING BAY DRIVE #1403 Address: P O BOX 661231 Address: City-St-Zip: MIAMI SPRINGS, FL 33261 US City-St-Zip: CORAL GABLES, FL 33158 US Title: () Delete Title: (X) Change ( ) Addition DURHAM, LARRY SPALDING, MARTIN Name: Name: 2665 SW 37 AVE 11301 SW 62 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33133 US City-St-Zip: PINECREST, FL 33156 US Title: () Delete Title: ( ) Change (X) Addition WAHLSTROM, KIM P Name: Name: Address: Address: 1107 GENOA STREET CORAL GABLES, FL 33134 US City-St-Zip: 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: KIM P. WAHLSTROM D 04/15/2009