

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739101

FILED  
Feb 11, 2008  
Secretary of State

**Entity Name:** PERRY MEN'S CLUB, INC.

**Current Principal Place of Business:**

1051 SOUTH WARNER STREET  
PERRY, FL 32347

**New Principal Place of Business:**

**Current Mailing Address:**

103 WORLEY WAY  
PERRY, FL 32347

**New Mailing Address:**

**FEI Number:** 59-2677353

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, DAVID L  
103 WORLEY WAY  
PERRY, FL 32347 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: PD ( ) Delete  
Name: WILLIAMS, DAVID L  
Address: 103 WORLEY WAY  
City-St-Zip: PERRY, FL 32347

Title: VD ( ) Delete  
Name: WELLS, NORMAN  
Address: 704 WEST UNION ST  
City-St-Zip: PERRY, FL 32347

Title: VD ( ) Delete  
Name: DEMPS, THOMAS  
Address: 213 WEST WALNUT  
City-St-Zip: PERRY, FL 32349

**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:

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: DAVID L WILLIAMS

PD

02/11/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date