2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741066

FILED Mar 07, 2008 Secretary of State

Entity Name: THE ESTERO BEACH AND TENNIS CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

7330 ESTERO BLVD

US FORT MYERS, FL 33931

Current Mailing Address: New Mailing Address:

7330 ESTERO BLVD

FORT MYERS, FL 33931 US

FEI Number: 59-2755187 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:

SHIELDS, CHRISTOPHER J 1833 HENDRY ST FORT MYERS, FL 33901 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition WERNER, BECKY REIMANN, STEVEN Name: Name: 7150 ESTERO BLVD #506 Address: 3 UPPER POND COURT Address:

City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: CENTERPORT, NY 11721

Title: **VDP** () Delete Title: (X) Change () Addition

REIMANN, STEVE Name: RICHERT, HERMAN Name:

Address: 3 UPPER POND CT Address: 12577 COCONUT CREEK COURT City-St-Zip: CENTERPORT, NY 117211556 City-St-Zip: FT. MYERS, FL 33908

Title: () Delete Title: SD (X) Change () Addition

COVELESKE, RON DIX, ROLLIN Name: Name:

210 NATURE VIEW CT Address: Address: 10154 S. SEELEY AVENUE City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: CHICAGO, IL 60643

TD

(X) Change () Addition Title: TD () Delete Title: Name: ABBOTT, ARLETTE Name: ABBOTT, ARLENE Address: 7360 ESTERO BLVD #902 Address: 7360 ESTERO BLVD. #902 City-St-Zip: FORT MYERS BEACH, FL 33931 FT. MYERS BEACH, FL 33931

City-St-Zip:

Title: () Delete Title: (X) Change () Addition MARRONE, LOUIS L SHEA, JIM Name: Name:

6351 ESTERO BLVD #701 N8550 SEWARD DRIVE Address: Address: FORT MYERS BEACH, FL 33931 City-St-Zip: City-St-Zip: **BERLIN, WI 54923**

Title: () Delete Title: (X) Change () Addition

SHEA, JIM POHLIS, ADOLF Name: Name: Address: N8550 SEWARD DR Address: 8251 S. SCHOOL ST. **BERLIN, WI 54923** LAGRANGE, IL 60525 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: JENNIFER ECKENROAD, LCAM LCAM 03/07/2008

Electronic Signature of Signing Officer or Director

Date