

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008 8:00 am
Secretary of State

03-13-2008 90029 016 ****61.25

DOCUMENT # 741940

1. Entity Name
EVERGLADES CITY CLUB LODGE AND VILLAS, INC.



Principal Place of Business
102 E. BROADWAY
P.O. BOX 530
EVERGLADES CITY, FL 34139 US

Mailing Address
102 E. BROADWAY
P.O. BOX 530
EVERGLADES CITY, FL 34139 US

40044311



2. Principal Place of Business - No P.O. Box #

3. Mailing Address
1350 PELHAM ROAD
 Suite, Apt. #, etc.
WINTER PARK, FL

03032008 Chg-NP CR2E037 (12/06)

Suite, Apt. #, etc.

City & State

4. FEI Number
65-0079819

Applied For
 Not Applicable

Zip Country
32789 USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CULL, WILLIAM J
9621 NW 28TH ST.
HOLLYWOOD, FL 33024

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee Is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	CULL, WILLIAM	
STREET ADDRESS	9621 NW 28TH ST	
CITY-ST-ZIP	HOLLYWOOD, FL	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	LAPLANT, WILLIAM	
STREET ADDRESS	102 E BROADWAY, #409 BOX 202	
CITY-ST-ZIP	EVERGLADES CITY, FL 34139	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CLOUGH, CARTER	
STREET ADDRESS	9631 N.W. 28TH ST.	
CITY-ST-ZIP	HOLLYWOOD, FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	WEBB, JOHN	
STREET ADDRESS	1350 PELHAM RD.	
CITY-ST-ZIP	WINTER PARK, FL 32789	
TITLE	S	<input type="checkbox"/> Delete
NAME	MITOFF, SUSAN	
STREET ADDRESS	102 E. BROADWAY UNIT 408	
CITY-ST-ZIP	EVERGLADES, FL 33929	
TITLE	D	<input type="checkbox"/> Delete
NAME	GEORGE, DAVID	
STREET ADDRESS	102 E BROADWAY, UNIT 207	
CITY-ST-ZIP	EVERGLADES CITY, FL 33929	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MIKE HOLMES	
STREET ADDRESS	102 E. Broddway Unit # 421	
CITY-ST-ZIP	Everglades City, FI 34139	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mary Repko	
STREET ADDRESS	102 E. Broadway Unit #107	
CITY-ST-ZIP	Everglades City, FI 34139	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: John A. Webb 3/10/08 407-647-7979

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40044311

741940

Document # 741940

In Addition :

Glen Tucker D
102 East Broadway
Unit # 205
Everglades City, FL 34139

Brian Lowe D
208 Leigh Road
Wimborne BH21 2BZ
Dorset
England

Soren Larsen D
102 East Broadway
Unit # 300
Everglades City, FL 34139