2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743078

FILED Jan 18, 2012 Secretary of State

Entity Name: TWIN FOUNTAINS CLUB, INC.

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

6400 TWIN FOUNTAIN DR. LAKE WALES, FL 338988700 US

Current Mailing Address: New Mailing Address:

6400 TWIN FOUNTAIN DR. LAKE WALES, FL 338988700 US

FEI Number: 59-2933376 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:

KATZMAN GARFINKEL & BERGER 300 N. MAITLAND AVENUE MAITLAND, FL 32751 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:

Title: ADVP

Name: EUBANKS, JAMES A

Address: 6205 TREASURE VALLEY LOOP City-St-Zip: LAKE WALES, FL 33898

Title: PRES

Name: TAYLOR, DONALD
Address: 168 CHERRYWOOD DR.
City-St-Zip: LAKE WALES, FL 33898

Title: VP

Name: HULBERT, LARRY
Address: 353 EDGEWOOD BLVD.
City-St-Zip: LAKE WALES, FL 33898

Title: DR

Name: JACK, FETTY

Address: 221 CHERRYWOOD DR City-St-Zip: LAKE WALES, FL 33898

Title: DR

Name: SMITH, JIM C

Address: 142 EDGEWOOD BLVD. City-St-Zip: LAKE WALES, FL 33898

Title: DR

Name: MILLHOLLANDD, LARRY Address: 6377 ELMWOOD AVE. City-St-Zip: LAKE WALES, FL 33898

I hereby 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 all other like empowered.

SIGNATURE: JAMES A. EUBANKS ADVP 01/18/2012