

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747493

FILED
Apr 14, 2008
Secretary of State

Entity Name: THE HAMLET COUNTRY CLUB, INC.

Current Principal Place of Business:

3600 HAMLET DRIVE
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

3600 HAMLET DRIVE
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 59-1907133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLETTE, RICK
3600 HAMLET DRIVE
DELRAY BEACH, FL 33445 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: CUMMINS, ROBERT
Address: 4892 PINEVIEW CIR
City-St-Zip: DELRAY BEACH, FL 33445

Title: DS () Delete
Name: GRAYSON, JO ANN
Address: 662 LAKEWOOD CIR W
City-St-Zip: DELRAY BEACH, FL 33445

Title: DT () Delete
Name: NEWMAN, TED
Address: 4633 OAKTREE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: DV () Delete
Name: REDMAN, BILL
Address: 4911 PINETREE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOLDSTEIN, ALAN
Address: 648 LAKEWOOD CIR E
City-St-Zip: DELRAY BEACH, FL 33445

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: RICK COLLETTE

RA

04/14/2008

Electronic Signature of Signing Officer or Director

Date