

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747609

FILED
Jul 02, 2009
Secretary of State

Entity Name: 448 COMMUNITY CLUB, INC.

Current Principal Place of Business:

16024 CR 448
TAVARES, FL 32778 US

New Principal Place of Business:

Current Mailing Address:

28947 SANDY LN
TAVARES, FL 32778 US

New Mailing Address:

16024 CR 448
TAVARES, FL 32778 US

FEI Number: 59-2008027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WOOD, SUZETTE
28947 SANDY LAKE
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

DILLON, CAROLYN M
27938 TAMMI DRIVE
TAVARES, FL 32778 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: CAROLYN M DILLON

07/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HIXON, JIMMIE
Address: 28009 LOIS DR
City-St-Zip: TAVARES, FL 32778

Title: V () Delete
Name: MCGLOTHIN, LOUIE
Address: 28832 TAMMI DR
City-St-Zip: TAVARES, FL 32778

Title: T () Delete
Name: WOOD, SUZETTE
Address: 28947 SANDY LN
City-St-Zip: TAVARES, FL 32778

Title: S () Delete
Name: KEARNEY, APRIL
Address: 28940 WILLIAMS WOODS DR
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: DILLON, CAROLYN M
Address: 27938 TAMMI DRIVE
City-St-Zip: TAVARES, FL 32778

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: CAROLYN M. DILLON

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07/02/2009

Electronic Signature of Signing Officer or Director

Date