

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748475

FILED
Mar 26, 2009
Secretary of State

Entity Name: PALM BEACH COUNTY GOLF ASSOCIATION, INC.

Current Principal Place of Business:

2100 EMERALD DUNES DR.
WEST PALM BEACH, FL 33411

New Principal Place of Business:

806 8TH TERRACE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

P O BOX 32123
WEST PALM BEACH, FL 33420

New Mailing Address:

FEI Number: 59-2151354 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BELEN, TOMMY
806 8TH TERR
PALM BCH GARDENS, FL 33418 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: T () Delete
Name: LOYD, LENNY
Address: 789 S. FEDERAL HWY SUITE 209
City-St-Zip: STUART, FL 34994

Title: VC () Delete
Name: JOHN, ARRIGO
Address: 2630 TECUMSEH DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: SD () Delete
Name: WESTON, GEORGE
Address: 209 DEBRA LANE
City-St-Zip: PALM BEACH, FL 33480

Title: CD () Delete
Name: ROONEY, JR., PATRICK
Address: 1111 N. CONGRESS AVENUE
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: CD (X) Change () Addition
Name: HENDERSON, KYLE
Address: 4841 BERKLEY MEWS
City-St-Zip: WEST PALM BEACH, FL 33415

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: TOMMY BELEN

E.D.

03/26/2009

Electronic Signature of Signing Officer or Director

Date