



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2008 8:00 am
Secretary of State

02-26-2008 90003 008 ****61.25

DOCUMENT # 754452 1. Entity Name RUDDER CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3160 MATECUMBE KEY RD. PUNTA GORDA, FL 33955 US			Mailing Address C/O BENSONS INC 12650 WHITEHALL DRIVE FORT MYERS, FL 33907 US		
2. Principal Place of Business - No P.O. Box # 801 ISLAMORADA BLVD		3. Mailing Address Suite, Apt. #, etc.			
City & State PUNTA GORDA, FL		City & State		4. FEI Number 59-2053950	
Zip 33955		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VANDALL, BONITA D 12650 WHITEHALL DR FORT MYERS, FL 33907			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. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROGIEAS, CHRISTIAN 801 ISLAMORADA BLVD #24B PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOGG, GORDON 1001 ISLAMORADA BLVD #13B PUNTA GORDA, FL 33955	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GLADISH, ANDY 801 ISLAMORADA BLVD. #23C PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOGG, CHERYL 1001 ISLAMORADA BLVD #13B PUNTA GORDA, FL 33955	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCCARTHY, NOREEN 801 ISLAMORADA BLVD. # 23B PUNTA GORDA, FL 33955	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BRINDA, DEE 801 ISLAMORADA BLVD #21C PUNTA GORDA, FL 33955	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AUDRIAN, DONALD 1001 ISLAMORADA BLVD. 11A PUNTA GORDA, FL 33955	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AUDRAIN, DONALD 1001 ISLAMORADA BLVD # 11A PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRINDA, JOHN 801 ISLAMORADA BLVD #21C PUNTA GORDA, FL 33955	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 			2/6/08 941-637-1753		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		