2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756148

Entity Name: THE BINNACLE CLUB, INC.

FILED Apr 15, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--|-----------------------------------|
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C/O COASTAL PROPERTY MANAGEMENT 501 GOODLETTE RD.N, STE C-200 NAPLES, FL 34102 US

Current Mailing Address: New Mailing Address:

C/O COASTAL PROPERTY MANAGEMENT 501 GOODLETTE RD.N, STE C-200 NAPLES, FL 34102 US

FEI Number: 59-2186080 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:

COASTAL PROPERTY MANAGEMENT OF SW FLORIDA 501 GOODLETTE RD. N., STE C-200 NAPLES, FL 34102 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 P (X) Change () Addition

 Name:
 WEBSTER, RICHARD
 Name:
 WEBSTER, RICHARD

 Address:
 1650 IXORA DR
 Address:
 1650 IXORA DR

Address: 1650 IXORA DR Address: 1650 IXORA DR
City-St-Zip: NAPLES, FL City-St-Zip: NAPLES, FL

 Title:
 VPT
 () Delete
 Title:
 VP
 (X) Change () Addition

 Name:
 BARTON, POLLY
 Name:
 BARTON, POLLY

 Address:
 3300 BINNACLE DR., #204
 Address:
 3300 BINNACLE DR., #204

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:
 NAPLES, FL 34102

Title: S () Delete Title: T (X) Change () Addition

 Name:
 HOPKINS, NINA
 Name:
 HOPKINS, NINA

 Address:
 3300 BINNACLE DR 210
 Address:
 3300 BINNACLE DR 210

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:
 NAPLES, FL 34102

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: JOHN S GREEN MRG 04/15/2009