

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756187

FILED
Mar 15, 2009
Secretary of State

Entity Name: FORT PIERCE SPORTFISHING CLUB, INC.

Current Principal Place of Business:

2303 ATLANTIC BEACH AVE
FORT PIERCE, FL 34949

New Principal Place of Business:

657 N. SECOND STREET
FORT PIERCE, FL 34950

Current Mailing Address:

P.O. BOX 4051
FORT PIERCE, FL 349484051

New Mailing Address:

FEI Number: 59-2163497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMBS, BRIAN
2303 ATLANTIC BEACH BLVD
FORT PIERCE, FL 34949 US

Name and Address of New Registered Agent:

TILLMAN, VICTORIA L
657 N. SECOND STREET
FORT PIERCE, FL 34950 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: VICTORIA L. TILLMAN

03/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: DAWSON, DEBORA
Address: 7002 KENWOOD DR
City-St-Zip: FORT PIERCE, FL 34951

Title: T () Delete
Name: COMBS, BRIAN
Address: 2303 ATLANTIC BEACH BLVD
City-St-Zip: FORT PIERCE, FL 34949

Title: P () Delete
Name: BENTON, KADRI
Address: 1355 BAYSHORE DR
City-St-Zip: FORT PIERCE, FL 34952

Title: S () Delete
Name: TILLMAN, VICKEY
Address: 435 WATERS WAY
City-St-Zip: FORT PIERCE, FL 34946

Title: VP () Delete
Name: GONZALEZ, ROGELIO
Address: 1206 FLEET WOOD LN
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: TILLMAN, SUSAN
Address: 5407 PALM DRIVE
City-St-Zip: FORT PIERCE, FL 34982

Title: P (X) Change () Addition
Name: GONZALEZ, ROGELIO
Address: 1206 FLEETWOOD LANE
City-St-Zip: FORT PIERCE, FL 34982

Title: S (X) Change () Addition
Name: TILLMAN, VICTORIA
Address: 435 WATERS WAY
City-St-Zip: FORT PIERCE, FL 34946

Title: VP (X) Change () Addition
Name: NELSON, CHRIS
Address: P. O. BOX 12568
City-St-Zip: FORT PIERCE, FL 34979

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: SUSAN TILLMAN

TREA

03/15/2009

Electronic Signature of Signing Officer or Director

Date