## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 756701**

FILED Apr 10, 2009 Secretary of State

Entity Name: THE COUNTRY CLUB OF BREVARD INC. **Current Principal Place of Business: New Principal Place of Business:** 1591 SOUTH FISKE BOULEVARD ROCKLEDGE, FL 32955 **Current Mailing Address: New Mailing Address:** 1591 SOUTH FISKE BOULEVARD ROCKLEDGE, FL 32955 FEI Number: 59-2092758 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: STAMER, GEORGE F 1811 HENSLEY DR. ROCKLEDGE, FL 32955 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: () Change () Addition () Delete THOMPSON, GARY Name: Name: Address: 99 N ATLANTIC AVE Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: Title: () Delete Title: () Change () Addition STAMER, GEORGE Name: Name: Address: 1811 HENSLEY DR. Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition CAMP, GLEN Name: CAMP, GLEN Name: 2296 ROCKLEGDE DRIVE 2296 ROCKLEGDE DRIVE Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955 Title: ( ) Delete Title: SD (X) Change ( ) Addition Name: RIDDER, STEVE Name: RIDDER, STEVE Address: 2895 S TROPICAL TRAIL Address: 2895 S TROPICAL TRAIL City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32953

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: GEORGE STAMER P 04/10/2009