

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756890

FILED  
Feb 21, 2008  
Secretary of State

Entity Name: FLORIDA ALFA CLUB, INC.

## Current Principal Place of Business:

% OSTEEN D. GREENE  
1410 PINEAPPLE LANE  
CLEARWATER, FL 33759

## New Principal Place of Business:

## Current Mailing Address:

% OSTEEN D. GREENE  
1410 PINEAPPLE LANE  
CLEARWATER, FL 33759

## New Mailing Address:

FEI Number: 59-3081442      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GREENE, OSTEEN D.  
1410 PINEAPPLE LANE  
CLEARWATER, FL 33759      US

## Name and Address of New Registered Agent:

GREENE, OSTEEN D.  
1410 PINEAPPLE LANE  
CLEARWATER, FL 33759      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: OSTEEN D. GREENE

02/21/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RADY, JOHN  
Address: 930 BRITTON ST.  
City-St-Zip: LARGO, FL 33770

Title: D ( ) Delete  
Name: CHIP, DENYKO  
Address: 10240 PARSONS ST.  
City-St-Zip: TAMPA, FL 33615

Title: ST ( ) Delete  
Name: GREENE, MARGARET H  
Address: 1410 PINEAPPLE LANE  
City-St-Zip: CLEARWATER, FL 33759

Title: D ( ) Delete  
Name: CORREA, DELSON  
Address: 5016 12TH AVE. S.  
City-St-Zip: ST. PETERSBURG, FL 33707

Title: V ( ) Delete  
Name: GREENE, OSTEEN D.,  
Address: 1410 PINEAPPLE LANE  
City-St-Zip: CLEARWATER, FL 33759

Title: D ( ) Delete  
Name: PICOT, JOHN  
Address: 1545 FOXCRAFT DR. W.  
City-St-Zip: PALM HARBOR, FL 34683

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

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

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

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: MARGARET H. GREENE

ST

02/21/2008

Electronic Signature of Signing Officer or Director

Date