

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757788

FILED
Feb 11, 2009
Secretary of State

Entity Name: BROOKRIDGE COUNTRY CLUB GOLF ASSOCIATION, INC.

Current Principal Place of Business:

8161 HAMPTON STREET
BROOKSVILLE, FL 34613

New Principal Place of Business:

Current Mailing Address:

8161 HAMPTON STREET
BROOKSVILLE, FL 34613

New Mailing Address:

8161 HAMPTON STREET
BROOKSVILLE, FL 34613

FEI Number: 59-2141343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARP, MICHAEL S PRES
8305 WEATHERFORD AVE
BROOKSVILLE, FL 34613 US

Name and Address of New Registered Agent:

VAILES, CHARLES R PRES
8161 HAMPTON ST
BROOKSVILLE, FL 34613 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: CHARLES R. VAILES, PRES

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: VAILES, RALPH S
Address: 8493 DICKENS AVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: VP () Delete
Name: KLINE, JERRY
Address: 14282 MIDFIELD STREET
City-St-Zip: BROOKSVILLE, FL 34613

Title: S () Delete
Name: BABCOCK, MARY
Address: 14124 DEL SILVER DRIVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: T () Delete
Name: WARREN, SIDNEY
Address: 9170 SALISBURY DRIVE
City-St-Zip: BROOKSVILLE, FL 34613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: VAILES, CHARLES R
Address: 8493 DICKENS AVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: VP (X) Change () Addition
Name: GAUL, RAYMOND
Address: 7479 MORIAH AVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: SEC (X) Change () Addition
Name: BABCOCK, MARY
Address: 14124 DEL SILVER DRIVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: TRES (X) Change () Addition
Name: AGLE, RAYMOND
Address: 8170 COUNTRY CLUB DR
City-St-Zip: BROOKSVILLE, FL 34613

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: CHARLES R VAILES

PRES

02/11/2009

Electronic Signature of Signing Officer or Director

Date