

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760183

FILED
Jan 07, 2009
Secretary of State

Entity Name: LA COSTA BEACH CLUB RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1504 N OCEAN BLVD.
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1504 N OCEAN BLVD.
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-2181495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, HENRY W ESQ.
JOHNSON, ZIPPAY & WALTERS P.A.
1401 N. UNIVERSITY DRIVE, SUITE 301
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: MALMED, RICHARD
Address: 1504 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: VPD () Delete
Name: WILLIAMS, CLIFFORD J
Address: 1504 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: SD () Delete
Name: SCOTT, GREG
Address: 1504 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD () Delete
Name: MILLER, DANIEL
Address: 1504 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, CLIFFORD
Address: 1504 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: VPD (X) Change () Addition
Name: WHITLOCK, NANCY
Address: 1504 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

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

Title: TD (X) Change () Addition
Name: MILLER, DANIEL E
Address: 1504 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

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: GREG SCOTT

SD

01/07/2009

Electronic Signature of Signing Officer or Director

Date