

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760919

FILED
Apr 09, 2009
Secretary of State

Entity Name: BRIAR CREEK SOCIAL CLUB COMMUNITY NO. 2, INC.

Current Principal Place of Business:

175 CLUBVIEW DR
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

Current Mailing Address:

153 CLUBVIEW DDR
SAFETY HARBOR, FL 34695 US

New Mailing Address:

FEI Number: 59-2121723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OCONNOR, AUDREY
137 PINEWOOD TERR
SAFETY HARBOR, FL 34695 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: P () Delete
Name: BOWLBY, MARSHA
Address: 153 CLUBVIEW DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VP () Delete
Name: FOGARTY, NANCY
Address: 75 COTTAGEWOOD DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DRS () Delete
Name: NYHUS, MARILYN
Address: 115 BRIAR CREEK BLVD.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: DCS () Delete
Name: BEYER, DARLENE
Address: 183 CLUBVIEW DR.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: T () Delete
Name: OCONNOR, AUDREY
Address: 137 PINEWOOD TERR
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O'CO (X) Change () Addition
Name: RUPPRECHT, DONNA
Address: 153 CLUBVIEW DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

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

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

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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: DONNA RUPPRECHT

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date