2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#761048

FILED Jan 21, 2009 Secretary of State

Entity Name: CALUSA CLUB VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

urrent P	rincipal Place	of Business:	New Principal Place of Bu	ısiness:	
8001 OLE	CUTLER RD		18001 OLD CUTLER RD 521		
IIAMI, FL	33157 US		MIAMI, FL 33157 US		
current Mailing Address:			New Mailing Address:	New Mailing Address:	
	CUTLER RD		18001 OLD CUTLER RD		
09 IIAMI, FL	33157 US		521 MIAMI, FL 33157 US		
El Number:	: 59-2384482	FEI Number Applied For ()	FEI Number Not Applicable ()	ertificate of Status Desired ()	
lame and	Address of C	ırrent Registered Agent:	Name and Address of Nev	v Registered Agent:	
8001 OLE STE. 333	ANTHONY CUTLER RD 33157 US		BROUGH, DAIVD 1900 N COMMERCE PKW' WESTON, FL 33326 US		
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing its registered offic	e or registered agent, or both	
the State		·	urpose of changing its registered offic	e or registered agent, or both 01/21/2009	
the State	e of Florida. RE: <u>DAVID BR</u>	·			
n the State	e of Florida. RE: <u>DAVID BR</u>	OUGH c Signature of Registered Ag	nt	01/21/2009	
the State	e of Florida. RE: DAVID BR Electroni S AND DIRECT	OUGH c Signature of Registered Agr CORS: Delete	nt ADDITIONS/CHANGES TO	01/21/2009 Date	
n the State IGNATUF PFFICERS ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	e of Florida. RE: DAVID BR Electroni S AND DIRECT P () SHAFFER, THOI 8817 SW 130 PI MIAMI, FL 3318	OUGH c Signature of Registered Agr CORS: Delete MAS 6 Delete LANE	ADDITIONS/CHANGES TO Title: () Ch Name: Address: City-St-Zip:	01/21/2009 Date DOFFICERS AND DIRECTO	
n the State IGNATUF DFFICERS itle: ame: ddress:	e of Florida. RE: DAVID BR Electroni S AND DIRECT P () SHAFFER, THOI 8817 SW 130 PI MIAMI, FL 3318 V () GREEN, STEVE 13253 SW 88TH MIAMI, FL 3318	OUGH c Signature of Registered Age FORS: Delete MAS Delete LANE 6 Delete DRGE	Title: () Ch Name: Address: City-St-Zip: Title: () Ch Name: Address: City-St-Zip:	01/21/2009 Date DOFFICERS AND DIRECTO nange () Addition nange () Addition	

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: THOMAS SHAFFER P 01/21/2009