

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90027 040 ****61.25

DOCUMENT # 764844

1. Entity Name

THE COUNTRY CLUB AT JACARANDA WEST, INC.



Principal Place of Business

1901 JACARANDA BLVD
VENICE FL 34293-3815

Mailing Address

1901 JACARANDA BLVD
VENICE FL 34293-3815

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2240234

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PEDERSEN, GAIL
2040 OAKRIDGE CIRCLE
VENICE FL 34293

7. Name and Address of New Registered Agent

Name

Barbara A. Scott

Street Address (P.O. Box Number is Not Acceptable)

1455 Quail Lake Drive

City

Venice

FL

Zip Code

34293

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Barbara A. Scott*

Barbara A. Scott, Secretary

1/27/04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> Delete
NAME	MOFFA, JOSEPH G	
STREET ADDRESS	5007 BELLA TERRA DRIVE	
CITY-ST-ZIP	VENICE FL 34293	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	PEDERSEN, GAIL	
STREET ADDRESS	2040 OAKRIDGE CIRCLE	
CITY-ST-ZIP	VENICE FL 34293	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BICKEL, ROBERT D	
STREET ADDRESS	3148 HERON SHORES DRIVE	
CITY-ST-ZIP	VENICE FL 34293	
TITLE	T	<input type="checkbox"/> Delete
NAME	BRADLEY, ARTHUR J	
STREET ADDRESS	539 LAUREL CHERRY LANE	
CITY-ST-ZIP	VENICE FL 34293	
TITLE	D	<input type="checkbox"/> Delete
NAME	THIERS, ROBERT G	
STREET ADDRESS	524 LAKE OF THE WOODS DRIVE	
CITY-ST-ZIP	VENICE FL 34293	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PIEPER, KENNETH	
STREET ADDRESS	865 WOOD SORREL LANE	
CITY-ST-ZIP	VENICE FL 34293	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Moffa, Joseph G.	
STREET ADDRESS	5007 Bella Terra Drive	
CITY-ST-ZIP	Venice, FL 34293	
TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dumas, Donald	
STREET ADDRESS	196 Grand Oak Circle	
CITY-ST-ZIP	Venice, FL 34292	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Scott, Barbara A.	
STREET ADDRESS	1455 Quail Lake Drive	
CITY-ST-ZIP	Venice, FL 34293	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Thiers, Robert G.	
STREET ADDRESS	524 Lake of the Woods Drive	
CITY-ST-ZIP	Venice, FL 34293	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Modjeski, Raymond	
STREET ADDRESS	613 Madrid Avenue	
CITY-ST-ZIP	Venice, FL 34285	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Donald Dumas

Donald Dumas, President

1/27/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #