2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005
Secretary of State

DOCUMENT# 765229

Entity Name: ST. ANDREWS COUNTRY CLUB, INC.

Current Principal Place of Business:

17557 CLARIDGE OVAL, WEST
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

17557 CLARIDGE OVAL, WEST
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 59-2000688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VIZZI, MICHAEL G
ST. ANDREWS COUNTRY CLUB, INC.
17557 CLARIDGE OVAL WEST
BOCA RATON, FL 33496 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: LIFTON, HARVEY
Address: 17557 CLARIDGE OVAL WEST
City-St-Zip: BOCA RATON, FL 33496 US

Title: EVPD ( ) Delete
Name: DIRECTOR, GERALD
Address: 17557 CLARIDGE OVAL WEST
City-St-Zip: BOCA RATON, FL 33496 US

Title: VPD ( ) Delete
Name: LEVITT, HERB
Address: 17557 CLARIDGE OVAL WEST
City-St-Zip: BOCA RATON, FL 33496 US

Title: TD ( ) Delete
Name: BLOCK, MICHAEL
Address: 17557 CLARIDGE OVAL WEST
City-St-Zip: BOCA RATON, FL 33496 US

Title: SD ( ) Delete
Name: MILICH, ROBIN
Address: 17557 CLARIDGE OVAL WEST
City-St-Zip: BOCA RATON, FL 33496 US

Title: D ( ) Delete
Name: IANNOTTI, JOHN M COO
Address: 17557 CLARIDGE OVAL WEST
City-St-Zip: BOCA RATON, FL 33496 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: ( ) Change ( ) Addition
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 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 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: MICHAEL G. VIZZI D 03/28/2005
Electronic Signature of Signing Officer or Director — Date