

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766690

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: LAKELAND YACHT AND COUNTRY CLUB, INC.

## Current Principal Place of Business:

929 LAKE HOLLINGSWORTH DR.  
LAKELAND, FL 338033199

## New Principal Place of Business:

929 LAKE HOLLINGSWORTH DR  
LAKELAND, FL 33803

## Current Mailing Address:

929 LAKE HOLLINGSWORTH DR.  
LAKELAND, FL 338033199

## New Mailing Address:

929 LAKE HOLLINGSWORTH DR.  
LAKELAND, FL 33803

FEI Number: 59-0587130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHEETS, SANDRA G.  
ONE LAKE MORTON DRIVE  
LAKELAND, FL 33801 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: PC ( ) Delete  
Name: MOORE, STEVE  
Address: P.O. BOX 1722  
City-St-Zip: LAKELAND, FL 33802

Title: C ( ) Delete  
Name: BORING, DEAN  
Address: 2112 HAWTHORNE DR.  
City-St-Zip: NICHOLS, FL 33863

Title: VC ( ) Delete  
Name: BUCK, STEVE  
Address: 1252 LAKEPOINT DR  
City-St-Zip: LAKELAND, FL 33813

Title: T ( ) Delete  
Name: CAMPBELL, KEVIN  
Address: 2610 CAMBRIDGE AVE  
City-St-Zip: LAKELAND, FL 33803

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition  
Name: BUCK, STEVE  
Address: 1252 LAKEPOINT DR  
City-St-Zip: LAKELAND, FL 33813

Title: VC (X) Change ( ) Addition  
Name: CAMPBELL, KEVIN  
Address: 2610 CAMBRIDGE AVE  
City-St-Zip: LAKELAND, FL 33803

Title: T (X) Change ( ) Addition  
Name: FRANKLIN, SCOTT  
Address: 2120 REANEY RD  
City-St-Zip: LAKELAND, FL 33803

Title: PC (X) Change ( ) Addition  
Name: BORING, DEAN  
Address: 2112 HAWTHORNE DR  
City-St-Zip: NICHOLS, FL 33863

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: MARTHA L SIMONS

CONT

02/12/2009

Electronic Signature of Signing Officer or Director

Date