2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767408

Entity Name: THE BATH CLUB, INC.

FILED Mar 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

712 S. CASEY KEY ROAD 712 S. CASEY KEY ROAD P.O. BOX 247 NOKOMIS, FL 34274

NOKOMIS, FL 34274

New Mailing Address: Current Mailing Address:

712 S. CASEY KEY ROAD P.O. BOX 247 NOKOMIS, FL 34274

FEI Number: 23-7090803 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCLAIN, PAUL X 128 SEA ANCHOR DR OSPREY, FL 34229

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MACCALLUM, JAMES WILBERDING, STEPHEN V PD Name: Name: 3528 CASEY KEY RD Address: 3528 CASEY KEY RD Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NOKOMIS, FL 34275 US

Title: TD Title: (X) Change () Addition () Delete MCLAIN, PAUL Name: MCLAIN, PAUL X TD Name:

Address: 128 SEA ANCHOR DR Address: 128 SEA ANCHOR DR City-St-Zip: OSPREY, FL 34229 City-St-Zip: OSPREY, FL 34229 US

Title: () Delete Title: (X) Change () Addition JAMIESON, TERRY JAMIESON, TERRY SD Name: Name:

9159 WILLOWBROOK DRIVE 9159 WILLOWBROOK DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: SARASOTA, FL 34238 US

() Delete Title: VD Title: VD (X) Change () Addition

Name: PAYLEITNER, ALLAN Name: TAFARO, HANK VD 329 SUNRISE DR 3300 CASEY KEY ROAD Address: Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NOKOMIS, FL 34275 US

Title: () Delete Title: (X) Change () Addition

WASHBURN, PENNY WASHBURN, PENNY Name: Name: 720 SORRENTO INLET DR 720 SORRENTO INLET DR Address: Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NOKOMIS, FL 34275 US

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: PAUL X. MC LAIN TD 03/29/2008