

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770560

FILED  
Apr 14, 2010  
Secretary of State

**Entity Name:** COUNTRY CLUB HARBOUR COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

3208 COUNTRY CLUB DR  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 255  
LYNN HAVEN, FL 32444

**New Mailing Address:**

**FEI Number:** 59-2498853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, PATTI  
3208 COUNTRY CLUB DR.  
LYNN HAVEN, FL 32444 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: TD  
Name: DERAMO, ANDREW  
Address: 2525 COUNTRY CLUB DR  
City-St-Zip: LYNN HAVEN, FL 32444

Title: D  
Name: KNOLL, TOM  
Address: 1602 COUNTRY CLUB DR  
City-St-Zip: LYNN HAVEN, FL 32444

Title: PD  
Name: HALL, RICHARD  
Address: 1314 COUNTRY CLUB DR.  
City-St-Zip: LYNN HAVEN, FL 32444

Title: SD  
Name: RIERA, JUDITH  
Address: 2814 COUNTRY CLUB DR  
City-St-Zip: LYNN HAVEN, FL 32444

Title: D  
Name: SHUMAKER, ROBERT  
Address: 3112 COUNTRY CLUB DR  
City-St-Zip: LYNN HAVEN, FL 32444

Title: VD  
Name: TAMIM, PATRICK  
Address: 2913 COUNTRY CLUB DR  
City-St-Zip: LYNN HAVEN, FL 32444

I hereby 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 all other like empowered.

SIGNATURE: RICHARD HALL

P

04/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date