

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001732

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: MEDALIST VILLAGE CLUB, INC.

## Current Principal Place of Business:

7700 SE MEDALIST PLACE  
HOBE SOUND, FL 33455

## New Principal Place of Business:

## Current Mailing Address:

9908 SE COTTAGE LANE  
HOBE SOUND, FL 33455

## New Mailing Address:

7700 SE MEDALIST PLACE  
HOBE SOUND, FL 33455

FEI Number: 65-0987355

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHNEIDER, JACK  
501 NORTH A1A  
JUPITER, FL 33477 US

## Name and Address of New Registered Agent:

SCHNEIDER, JACK  
2041 VISTA PARKWAY  
LEVEL 1  
WEST PALM BEACH, FL 33411 US

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: JACK SCHNEIDER

02/19/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NORMAN, GREG  
Address: 501 NORTH A1A  
City-St-Zip: JUPITER, FL 33477

Title: EVPD ( ) Delete  
Name: SCHNEIDER, JACK  
Address: 501 NORTH A1A  
City-St-Zip: JUPITER, FL 33477

Title: TD ( ) Delete  
Name: FAIR, IAN  
Address: P.O. BOX SS-5539  
City-St-Zip: NASSAU BAHAMAS,

Title: C ( ) Delete  
Name: DAVIS, WYNN  
Address: 501 N A1A  
City-St-Zip: JUPITER, FL 33477

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NORMAN, GREG  
Address: 2041 VISTA PARKWAY LEVEL 1  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: EVPD (X) Change ( ) Addition  
Name: SCHNEIDER, JACK  
Address: 2041 VISTA PARKWAY LEVEL 1  
City-St-Zip: WEST PALM BEACH, FL 33411

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

Title: C (X) Change ( ) Addition  
Name: DAVIS, WYNN  
Address: 2041 VISTA PARKWAY LEVEL 1  
City-St-Zip: WEST PALM BEACH, FL 33411

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: JACK SCHNEIDER

EVPD

02/19/2009

Electronic Signature of Signing Officer or Director

Date