

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000459

FILED
Apr 23, 2010
Secretary of State

Entity Name: CLUBSIDE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2140 NW RESERVE PARK TRACE
PORT ST LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

2140 NW RESERVE PARK TRACE
PORT ST LUCIE, FL 34986

New Mailing Address:

FEI Number: 65-1075276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ISAACSON, WILLIAM K
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 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: T
Name: CHASTAN, OWEN
Address: 9632 CROOKED STICK LN
City-St-Zip: PORT ST LUCIE, FL 34986

Title: P
Name: PERRY, PETER
Address: 9616 CROOKED STICK LN
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VP
Name: DON, ESTHER
Address: 9636 CROOKED STICK LN
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: S
Name: CHOBY, VICKIE
Address: 9624 CROOKED STICK LANE
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: D
Name: LORENZO, JERRY
Address: 9600 CROOKED STICK LN
City-St-Zip: PORT ST. LUCIE, FL 34986

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: PETER PERRY

P

04/23/2010

Electronic Signature of Signing Officer or Director

Date