

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02853

FILED
Feb 04, 2009
Secretary of State

Entity Name: ILLINOIS CLUB OF SPRING HILL FLORIDA, INC.

Current Principal Place of Business:

12005 THRASHER AVE
WEEKI WACHEE, FL 34614 US

New Principal Place of Business:

Current Mailing Address:

12005 THRASHER AVE
WEEKI WACHEE, FL 34614 US

New Mailing Address:

12005 THRASHER AVE
WEEKI WACHEE, FL 34614

FEI Number: 59-3107337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VASSEY, MICHAEL P
9009 CYPRESS GLEEN COURT
SPRING HILL, FL 34613 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: SD () Delete
Name: ANTOLAK, ANNA
Address: 4431 LAS PALMAS AVE
City-St-Zip: SPRING HILL, FL 34606

Title: VPD () Delete
Name: BEDALE, JOE
Address: 412 KNIGHTS BRIDGE RD
City-St-Zip: SPRING HILL, FL 34609

Title: PD () Delete
Name: GODFREY, PATRICIA J
Address: 12005 THRASHER AVE
City-St-Zip: WEEKI WACHEE, FL 34614

Title: TD () Delete
Name: VASSEY, MICHAEL P
Address: 9009 CYPRESS GLENN CT
City-St-Zip: WEEKI WACHEE, FL 34613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: ANTOLAK, ANNA
Address: 4431 LAS PALMAS AVE
City-St-Zip: SPRING HILL, FL 34606 US

Title: VPD (X) Change () Addition
Name: BEDALE, JOE
Address: 412 KNIGHTS BRIDGE RD
City-St-Zip: SPRING HILL, FL 34609 US

Title: PD (X) Change () Addition
Name: GODFREY, PATRICIA J
Address: 12005 THRASHER AVE
City-St-Zip: WEEKI WACHEE, FL 34614 US

Title: TD (X) Change () Addition
Name: VASSEY, MICHAEL P
Address: 9009 CYPRESS GLENN CT
City-St-Zip: WEEKI WACHEE, FL 34613 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: MICHAEL P VASSEY

TD

02/04/2009

Electronic Signature of Signing Officer or Director

Date