

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001166

FILED  
Apr 24, 2005  
Secretary of State

**Entity Name:** OKEECHOBEE GOLF & COUNTRY CLUB MEN'S GOLF ASSOCIATION, INC.

**Current Principal Place of Business:**

405 N.E. 131ST LANE  
OKEECHOBEE, FL 34972

**New Principal Place of Business:**

**Current Mailing Address:**

405 N.E. 131ST LANE  
OKEECHOBEE, FL 34972

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WALDAU, JAMES R  
140 N.E. 138TH STREET  
OKEECHOBEE, FL 34972 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: PD ( ) Delete  
Name: WALDAU, JAMES R  
Address: 140 NE 138TH STREET  
City-St-Zip: OKEECHOBEE, FL 34972

Title: STD ( ) Delete  
Name: WHITE, MICHAEL W  
Address: 13050 NE 4TH TERRACE  
City-St-Zip: OKEECHOBEE, FL 34972

Title: VD ( ) Delete  
Name: WHITE, RONNIE B  
Address: PO BOX 2943  
City-St-Zip: OKEECHOBEE, FL 34973

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 W. WHITE

STD

04/24/2005

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

\_\_\_\_\_  
Date