2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000566

FILED Aug 10, 2009 Secretary of State

Entity Name: OAKLAND PARK SHUFFLEBOARD CLUB INC.

Current Principal Place of Business: New Principal Place of Business:

OAKLAND PARK, FL 33334

Current Mailing Address: New Mailing Address:

1062 NE 35 ST

OAKLAND PARK, FL 33334

FEI Number: 59-1142938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MANN, ROGER H CANNON, EDWIN J III

1062 NE 35 ST 1062 NE 35 ST

OAKLAND PARK, FL 33334 US OAKLAND PARK, FL 33334 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: EDWIN J. CANNON, III 08/10/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

STD () Delete (X) Change () Addition

MANN, ROGER H CANNON, EDWIN J III Name: Name: 1062 NE 35 ST Address: 1062 NE 35 ST Address:

City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334

Title: VD () Delete Title: VD (X) Change () Addition

Name: FINN, KEVIN Name: CANNON, ERIN Address: 1062 N.E. 35 ST Address: 1062 N.E. 35 ST City-St-Zip: OAKLAND, FL 33334 City-St-Zip: OAKLAND, FL 33334

Title: () Delete Title: (X) Change () Addition

MANN, ROGER Name: CANNON, CLAYTON Name: Address: 1062 NE 35 ST Address: 1062 NE 35 ST City-St-Zip: OAKLAND, FL 33334 City-St-Zip: OAKLAND, FL 33334

Title: SD () Delete Title: SD (X) Change () Addition

Name: CANNON, EDWIN Name: BUSCHMAN, MATTHEW Address: 1062 N.E. 35 ST. Address: 1062 N.E. 35 ST. City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334

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: EDWIN J. CANNON, III STD 08/10/2009