2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# N04000003051

Entity Name: FLORIDA CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

500 FLORIDA CLUB BLVD.
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

93 ORANGE STREET
ST AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 20-0938590 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, RONALD W ESQ
93 ORANGE STREET
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

DOBSON, JEFFREY B P.A.
93 ORANGE STREET
ST AUGUSTINE, FL 32084 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: JEFFREY B. DOBSON 01/29/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HICKS, RAY
Address: 500 FLORIDA CLUB BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D ( ) Delete
Name: POOLE, SAM
Address: 500 FLORIDA CLUB BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D ( ) Delete
Name: DEMENT, ALICE
Address: 500 FLORIDA CLUB BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HICKS, JESSE R
Address: 500 FLORIDA CLUB BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32084

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

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

Title: D ( ) Change (X) Addition
Name: LEVETO, VIRGINIA
Address: 500 FLORIDA CLUB BLVD
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D ( ) Change (X) Addition
Name: DISANTIS, WILLIAM
Address: 500 FLORIDA CLUB BLVD
City-St-Zip: ST. AUGUSTINE, FL 32084

I hereby certify that the information supplied with this filing does not qualify for the 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: JESSE RAY HICKS PRES 01/29/2007
Electronic Signature of Signing Officer or Director Date