

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003051

FILED
Mar 26, 2009
Secretary of State

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 (X)

Name and Address of Current Registered Agent:

MORTON, MARIAN L
500 FLORIDA CLUB BLVD.
ST AUGUSTINE, FL 32084 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: D () Delete
Name: HICKS, JESSE R
Address: 500 FLORIDA CLUB BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D () Delete
Name: CHRYSSAIDIS, GEORGE
Address: 500 FLORIDA CLUB BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O (X) Change () Addition
Name: CHRYSSAIDIS, GEORGE
Address: 500 FLORIDA CLUB BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084

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

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

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

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: MARIAN L. MORTON

CAM

03/26/2009

Electronic Signature of Signing Officer or Director

Date