

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004139

FILED  
May 06, 2009  
Secretary of State

Entity Name: MADISON COUNTRY CLUB, INC.

## Current Principal Place of Business:

445 SW COUNTRY CLUB DR  
MADISON, FL 32340

## New Principal Place of Business:

## Current Mailing Address:

445 SW COUNTRY CLUB DR  
MADISON, FL 32340

## New Mailing Address:

FEI Number: 20-3699125      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:

BALLENGER, DAVID  
445 SW COUNTRY CLUB DR  
MADISON, FL 32340      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: BALLENGER, DAVID  
Address: 445 SW COUNTRY CLUB DR  
City-St-Zip: MADISON, FL 32340

Title: VP      ( ) Delete  
Name: BEGGS, TED  
Address: 445 SW COUNTRY CLUB DR  
City-St-Zip: MADISON, FL 32340

Title: D      ( ) Delete  
Name: CHERRY, LEE  
Address: 445 SW COUNTRY CLUB DR  
City-St-Zip: MADISON, FL 32340

Title: D      ( ) Delete  
Name: STEWART, KAREN  
Address: 445 SW COUNTRY CLUB DR  
City-St-Zip: MADISON, FL 32340

Title: D      ( ) Delete  
Name: BROWNING, BAILEY  
Address: 445 SW COUNTRY CLUB DR  
City-St-Zip: MADISON, FL 32340

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

## 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:

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

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

Title: D      ( ) Change (X) Addition  
Name: STEPHENS, BILLY  
Address: 445 SW COUNTRY CLUB ROAD  
City-St-Zip: MADISON, FL 32340

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: DAVID BALLENGER

PRES

05/06/2009

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

\_\_\_\_\_  
Date