2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006405

Entity Name: ESTERO NEWCOMERS CLUB INC.

FILED Apr 14, 2009 Secretary of State

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

P.O. BOX 1157 20451 ROOKERY DRIVE ESTERO, FL 33928 ESTERO, FL 33928

Current Mailing Address: New Mailing Address:

P.O. BOX 1157 P O BOX 1157 ESTERO, FL 33928 P STERO, FL 33929

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

DUGAN, CHRISTINE
9857 COLONIAL WALK N.
9194 SPRINGVIEW LOOP
ESTERO, FL 33928 US
ESTERO, FL 33928 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: JANICE LANFARE 04/14/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 CHRISTINE, DUGAN
 Name:
 JANICE, LANFARE

 Address:
 9857 COLONIAL WALK N
 Address:
 9194 SPRINGVIEW LOOP

 City-St-Zip:
 ESTERO, FL 33928
 City-St-Zip:
 ESTERO, FL 33928

Title: VP () Delete Title: VP (X) Change () Addition Name: LANFARE, JAN Name: LAUNSBACH, JANICE

Address: 9194 SPRINGVIEW LOOP Address: 19715 MADDELENA CIRCLE City-St-Zip: ESTERO, FL 33928 City-St-Zip: FT. MYERS, FL 33967

Title: S () Delete Title: () Change () Addition

 Name:
 NEAGLE, ANGELA
 Name:

 Address:
 19825 CASA VERDE WAY
 Address:

 City-St-Zip:
 FT. MYERSS, FL 33967
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 POWERS, LYNETTE
 Name:

 Address:
 20451 ROOKERY DR.
 Address:

 City-St-Zip:
 ESTERO, FL 33928
 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: LYNETTE POWERS T 04/14/2009