

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007247

FILED
Jan 16, 2009
Secretary of State

Entity Name: PORT MALABAR COUNTRY CLUB COMMUNITY ASSOCIATION INC.

Current Principal Place of Business:

PO BOX 61304
PALM BAY, FL 32906

New Principal Place of Business:

1425 SCEPTER CT NE
PALM BAY, FL 32905

Current Mailing Address:

PO BOX 61304
PALM BAY, FL 32906

New Mailing Address:

FEI Number: 20-1277847 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SEYERT, GEORGE
1425 SCEPTER COURT WE
PALM BAY, FL 329055024 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: TD () Delete
Name: SEYFERT, GEORGE
Address: 1425 SCEPTER COURT WE
City-St-Zip: PALM BAY, FL 32905

Title: PD () Delete
Name: MODGE, CHARLES
Address: 1508 MEADOW BROOK CR. NE
City-St-Zip: PALM BAY, FL 32905

Title: VP () Delete
Name: TKACS, RANDY
Address: 634 PINEHURST CR. NE
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: WOOD, RUSSELL
Address: 986 WAIAIAE CR. NE
City-St-Zip: PALM BAY, FL 32905

Title: S () Delete
Name: PERONARD, ALEXA
Address: 66 PURT MOTABA BLVD. NE
City-St-Zip: PALM BAY, FL 32905

Title: D () Delete
Name: TULLY, SAM
Address: 1181 MEADOWBROOK DR NE
City-St-Zip: PALM BAY, FL 32905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: MADGE, CHARLES
Address: 1508 MEADOW BROOK CR. NE
City-St-Zip: PALM BAY, FL 32905

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

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

Title: S (X) Change () Addition
Name: PERONARD, ALEXA
Address: 661 PORT MALABAR BLVD NE
City-St-Zip: PALM BAY, FL 32905

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: GEORGE A. SEYFERT

TD

01/16/2009

Electronic Signature of Signing Officer or Director

Date