

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04476

FILED
Apr 27, 2009
Secretary of State

Entity Name: THE UNIVERSITY OF FLORIDA TAYLOR COUNTY GATOR CLUB, INC.

Current Principal Place of Business:

C/O FRED W. OGILVIE
207 DOGWOOD WAY
PERRY, FL 32348

New Principal Place of Business:

Current Mailing Address:

C/O FRED W. OGILVIE
207 DOGWOOD WAY
PERRY, FL 32348

New Mailing Address:

FEI Number: 59-2961747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OGILVIE, FRED W.
207 DOGWOOD WAY
PERRY, FL 32348 US

Name and Address of New Registered Agent:

OGILVIE, FRED W VD
207 DOGWOOD WAY
PERRY, FL 32348 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: FRED W. OGILVIE

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURNS, BARBARA
Address: 530 EAST ASH ST
City-St-Zip: PERRY, FL 32347

Title: VD () Delete
Name: OGILVIE, FRED W
Address: 207 DOGWOOD WAY
City-St-Zip: PERRY, FL 32348

Title: SD () Delete
Name: RAULERSON, JEANNE
Address: 2675 BAXTER RD.
City-St-Zip: PERRY, FL 32348

Title: PD () Delete
Name: CULBREATH, BETTY
Address: 103 CREST DR
City-St-Zip: PERRY, FL 32348

Title: D () Delete
Name: RUFF, MACK J
Address: 2128 FERNS ST
City-St-Zip: PERRY, FL 32347

Title: TD () Delete
Name: EVANS, JUNE
Address: 515 W GREEN ST
City-St-Zip: PERRY, FL 32347

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: OGILVIE, FRED W
Address: 207 DOGWOOD WAY
City-St-Zip: PERRY, FL 32348

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:

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: FRED W. OGILVIE

VD

04/27/2009

Electronic Signature of Signing Officer or Director

Date