

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011530

FILED
Jan 22, 2009
Secretary of State

Entity Name: VALENCIA ISLES CULTURE CLUB, INC.

Current Principal Place of Business:

11153 KAUI CT.
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

11153 KAUI CT.
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 59-3829415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERMAN, DANIEL
11153 KAUI CT.
BOYNTON BEACH, FL 33437 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: DP () Delete
Name: PADDEN, JANET
Address: 7428 TONGA CT.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: DT () Delete
Name: SILVERMAN, DANIEL
Address: 11153 KAUI CT.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: DV () Delete
Name: SILVERMAN, MARILYN
Address: 11153 KAUI CT.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: V () Delete
Name: KABEL, ILENE
Address: 7316 TONGA CT.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: GERSHWIN, DOLLY
Address: 6578 HAWAIIAN AVE.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: SCHORR, JERRY
Address: 6711 MALTA DR.
City-St-Zip: BOYNTON BEACH, FL 33437

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 (X) Change () Addition
Name: WAHL, RONALD
Address: 7286 LAHANA CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

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: DANIEL SILVERMAN

TREA

01/22/2009

Electronic Signature of Signing Officer or Director

Date