

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011818

FILED  
Apr 02, 2010  
Secretary of State

Entity Name: FLORIDA CLUBHOUSE COALITION, INC.

**Current Principal Place of Business:**

1717 NE 9TH STREET  
BLDG A, STE 140  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

**Current Mailing Address:**

7257 N.E 4TH BLVD.  
318  
GAINESVILLE, FL 32609

**New Mailing Address:**

FEI Number: 22-3918471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DEMERS, MICHAEL J  
1717 NE 9TH STREET  
BLDG A, STE 140  
GAINESVILLE, FL 32609 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  
Name: DEMERS, PAMELA M  
Address: 7257 4TH BLVD 318  
City-St-Zip: GAINESVILLE, FL 326071600

Title: DVP  
Name: MEES, KATE  
Address: 434 WEST KENNEDY BLVD.  
City-St-Zip: ORLANDO, FL 32810

Title: DT  
Name: BERNARD, ANDY  
Address: 2101 N.E. 2ND STREET, APT. C-115  
City-St-Zip: GAINESVILLE, FL 32609

Title: DVP  
Name: MATTHEWS, DRAKE  
Address: 434 WEST KENNEDY BLVD.  
City-St-Zip: ORLANDO, FL 32810

Title: DS  
Name: MCCELLEN, AMY  
Address: 800 NE 95TH STREET  
City-St-Zip: MIAMI SHORES, FL 33138

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL J DEMERS

RA

04/02/2010

Electronic Signature of Signing Officer or Director

Date