

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001506

FILED
Apr 29, 2009
Secretary of State

Entity Name: HIGH SEAS CRUSING CLUB, INC.

Current Principal Place of Business:

8802 WENDY LANE
WEST PALM BEACH, FL 33411

New Principal Place of Business:

1495 FOREST HILL BLVE
STE B
WEST PALM BEACH, FL 33046 US

Current Mailing Address:

8802 WENDY LANE
WEST PALM BEACH, FL 33411

New Mailing Address:

1495 FOREST HILL BLVE
STE B
WEST PALM BEACH, FL 33046 US

FEI Number: 86-1159771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVIGNE, NORMA
8802 WENDY LANE
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

COOPER, KATHLEEN
1495 FOREST HILL BLVD
STE B
WEST PALM BEACH, FL 33406 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: KATHLEEN COOPER

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SLAVIN, DIANE
Address: 914 SHORE DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: D () Delete
Name: BERIAU, LORI
Address: 940 ISLES ROAD
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: D () Delete
Name: ROSE, LISA
Address: 40 WINDWARD ISLE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: D () Delete
Name: ROUSER, CECILY
Address: 912 WESTWIND DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: D (X) Delete
Name: ZIBELLI, JOE
Address: 2280 TREASURE ISLE #84
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LAVIGNE, NORMA
Address: 8802 WENDY LANE
City-St-Zip: WEST PALM BEACH, FL 33411 US

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

Title: D (X) Change () Addition
Name: COOPER, KATHLEEN
Address: 1495 FOREST HILL BLVD STE B
City-St-Zip: WEST PALM BEACH, FL 33406 US

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: KATHLEEN COOPER

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date