2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 07, 2009
Secretary of State

DOCUMENT# N06000011363

Entity Name: MATANZAS HOME RUN CLUB, INC.

Current Principal Place of Business:

3535 OLD KINGS ROAD NORTH
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

PO BOX 351045
PALM COAST, FL 321351045

New Mailing Address:

FEI Number: 20-5809819 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMBRIGHT, ROBERT
6 BIDDING PLACE
PALM COAST, FL 32137 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: P ( ) Delete
Name: DANYUS, PAT
Address: 9 CLARIDGE COURT NORTH
City-St-Zip: PALM COAST, FL 32137

Title: V ( ) Delete
Name: APPERSON, DON
Address: 18 BIG DIPPER LANE
City-St-Zip: PALM COAST, FL 32137

Title: T ( ) Delete
Name: LAMBRIGHT, ROBERT
Address: 6 BIDDING PLACE
City-St-Zip: PALM COAST, FL 32137

Title: S ( ) Delete
Name: RUFRANO, MARY
Address: 26 LAKESIDE PLACE WEST
City-St-Zip: PALM COAST, FL 32137

Title: S (X) Delete
Name: BELL, DEANNA
Address: 28 BALTIMORE LANE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DEE, KEVIN
Address: 34 BENNETT LANE
City-St-Zip: PALM COAST, FL 32137

Title: V (X) Change ( ) Addition
Name: BAILEY, KEVIN
Address: 11 CEDARFORD COURT
City-St-Zip: PALM COAST, FL 32137

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

Title: S (X) Change ( ) Addition
Name: SMITH, KATHLEEN
Address: 34 WESTLAWN PLACE
City-St-Zip: PALM COAST, FL 32164

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: ROBERT LAMBRIGHT T 12/07/2009

Electronic Signature of Signing Officer or Director — Date