

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010586

FILED
May 01, 2009
Secretary of State

Entity Name: FORT LAUDERDALE LACROSSE CLUB, INC.

Current Principal Place of Business:

4801 JOHNSON ROAD
SUITE 5
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

4801 JOHNSON ROAD
SUITE 5
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 22-3971135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCARBERRY, JASON L
2455 E. SUNRISE BLVD.
SUITE 1216
FORT LAUDERDALE, FL 33304 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: BARBA, RICHARD
Address: 440 LAKEVIEW
City-St-Zip: WESTON, FL 33326

Title: VP () Delete
Name: LEBOWITZ, PAT
Address: 270 LAYNE BLVD., #205
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VP () Delete
Name: LAMON, BO
Address: 4801 JOHNSON RD, SUITE 5
City-St-Zip: COCONUT CREEK, FL 33073

Title: T () Delete
Name: SCARBERRY, JASON
Address: 2455 E. SUNRISE BLVD., SUITE 1216
City-St-Zip: FT. LAUDERDALE, FL 33304

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:

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: JASON L. SCARBERRY

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05/01/2009

Electronic Signature of Signing Officer or Director

Date