

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011410

FILED  
Feb 17, 2009  
Secretary of State

**Entity Name:** THE SUN CITY CENTER GOLF & SOCIAL CLUB, INC.

**Current Principal Place of Business:**

2119 STERLING GLEN COURT  
SUN CITY CENTER, FL 33573

**New Principal Place of Business:**

**Current Mailing Address:**

2119 STERLING GLEN COURT  
SUN CITY CENTER, FL 33573

**New Mailing Address:**

P. O. BOX 5567  
SUN CITY CENTER, FL 33573

**FEI Number:** 26-2277370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACOBS, EDWIN H  
2119 STERLING GLEN COURT  
SUN CITY CENTER, FL 33573 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: BROWN, LAWRENCE W  
Address: 1325 MISTY GREENS DRIVE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D ( ) Delete  
Name: JACOBS, EDWIN H  
Address: 2119 STERLING GLEN COURT  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: T ( ) Delete  
Name: HAMM, AL  
Address: 2134 DEL WEBB BLVD WEST  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VP ( ) Delete  
Name: JEWELL, ROLLIN L  
Address: 1322 MISTY GREENS DR  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: S ( ) Delete  
Name: ROTTMAN, JAMES  
Address: 2307 EMERALD LAKE DR  
City-St-Zip: SUN CITY CENTER, FL 33573

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T (X) Change ( ) Addition  
Name: HADLEY, D DIANNE  
Address: 1819 DEL WEBB BLVD. E.  
City-St-Zip: SUN CITY CENTER, FL 33573

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: ALFRED HAMM

D

02/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date