2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2009
Secretary of State

DOCUMENT# N07000011582

Entity Name: ORANGE CITY SHUFFLEBOARD CLUB INC

Current Principal Place of Business:

220 N HOLLY AVE
ORANGE CITY, FL 32774 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 740705
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 26-1501273 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORAN, PATRICIA B
150 SO ORANGE AVE
ORANGE CITY, FL 32763 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: SKYLONDZ, STANLEY
Address: 1942 E COOPER DR
City-St-Zip: DELTONA, FL 32725 US

Title: S ( ) Delete
Name: MORAN, PATRICIA B
Address: 150 SOUTH ORANGE AVE
City-St-Zip: ORANGE CITY, FL 32763 US

Title: T ( ) Delete
Name: FOREY, RUTH E
Address: 217 COUNTRYSIDE DR
City-St-Zip: ORANGE CITY, FL 32763 US

Title: VP ( ) Delete
Name: BOUKOWSKI, LARRY
Address: 3171 PIGEON COVE ST
City-St-Zip: DELTONA, FL 32738

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: RUTH FOREY T 01/11/2009
Electronic Signature of Signing Officer or Director Date