

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004693

FILED
Jul 07, 2009
Secretary of State

Entity Name: THE CLUB OF CAPE CORAL, INC.

Current Principal Place of Business:

4515 DEL PRADO BOULEVARD
#4
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

4515 DEL PRADO BOULEVARD
#4
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 05-0622869 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:

TEUBER, STEVEN K
4223 DEL PRADO BLVD S
CAPE CORAL, FL 33904 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, D () Delete
Name: CLEARY, JENNIFER
Address: 4515 DEL PRADO BOULEVARD, #4
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VP () Delete
Name: PAOLI, DAVID D
Address: 4515 DEL PRADO BOULEVARD, #4
City-St-Zip: CAPE CORAL, FL 33904 US

Title: SEC () Delete
Name: IAMMATEO, MIKE
Address: 1103 SE 46 LANE, APARTMENT B
City-St-Zip: CAPE CORAL, FL 33904 US

Title: T (X) Delete
Name: SMART, CHRISTINA
Address: 4504 SW 5TH PLACE
City-St-Zip: CAPE CORAL, FL 33914 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLEARY, JENNIFER ROBIN M
Address: 4515 DEL PRADO BOULEVARD, #4
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VP (X) Change () Addition
Name: SMART, CHRISTINA
Address: 4504 SW 5TH PLACE
City-St-Zip: CAPE CORAL, FL 33914 US

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: JENNIFER ROBIN M CLEARY

P

07/07/2009

Electronic Signature of Signing Officer or Director

Date