

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006052

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** JRGAP-JUNIOR GOLF AMATEUR PROGRAM OF SAINT LUCIE COUNTY CORP.

**Current Principal Place of Business:**

1912 SW JAMESPORT DR.  
PORT SAINT LUCIE, FL 34953

**New Principal Place of Business:**

1856 SW NEWPORT ISLES BLVD  
PORT SAINT LUCIE, FL 34953

**Current Mailing Address:**

1912 SW JAMESPORT DR.  
PORT SAINT LUCIE, FL 34953

**New Mailing Address:**

1912 SW JAMESPORT DRIVE  
PORT SAINT LUCIE, FL 34953

**FEI Number:** 26-2915670

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRESPO, LUIS A.  
1912 SW JAMESPORT DR.  
PORT SAINT LUCIE, FL 34953 US

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

CRESPO, LUIS A.  
1912 SW JAMESPORT DRIVE  
PORT SAINT LUCIE, FL 34953 US

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: LUIS A CRESPO

04/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CRESPO, LUIS A.  
Address: 1912 SW JAMESPORT DR.  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D ( ) Delete  
Name: FORDYCE, JAMIE  
Address: 1129 SW SWAN LAKE CIR.  
City-St-Zip: PORT ST. LUCIE, FL 34896

Title: T ( ) Delete  
Name: TAYLOR, CARL  
Address: 1907 SW JAMESPORT DR.  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP ( ) Delete  
Name: DEL ROSARIO, ISAAC  
Address: 2133 S W NEWPORT ISLES BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: SD ( ) Delete  
Name: PELUSO, JULIE  
Address: 2213 SW MARSHFIELD COURT  
City-St-Zip: PORT SAINT LUCIE, FL 34953

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

Title: P (X) Change ( ) Addition  
Name: CRESPO, LUIS A.  
Address: 1912 SW JAMESPORT DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP (X) Change ( ) Addition  
Name: DEL ROSARIO, ISAAC  
Address: 2133 S W NEWPORT ISLES BLVD  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: T (X) Change ( ) Addition  
Name: TAYLOR, CARL  
Address: 1907 SW JAMESPORT DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: S (X) Change ( ) Addition  
Name: AVILA, SAMUEL  
Address: 5090 NW FIDDLE LEAF COURT  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: DG (X) Change ( ) Addition  
Name: FORDYCE, JAMIE  
Address: 1129 SW SWAN LAKE CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: LUIS A CRESPO

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date