2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2010
Secretary of State

DOCUMENT# N08000010576

Entity Name: REFLECTIONS CLUBHOUSE, INC.

Current Principal Place of Business:

5753 MIAMI LAKES DRIVE EAST
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

5753 MIAMI LAKES DRIVE EAST
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

QUESADA, PABLO S
2333 PONCE DE LEON BLVD.
SUITE 302
CORAL GABLES, FL 33134 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: D
Name: CLODFELTER, DAVID
Address: 5753 MIAMI LAKES DRIVE EAST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D
Name: CLODFELTER, DARRYL
Address: 5753 MIAMI LAKES DRIVE EAST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D
Name: CLODFELTER, MADELINE
Address: 5753 MIAMI LAKES DRIVE EAST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D
Name: MESA, LEONEL DR
Address: 5753 MIAMI LAKES DRIVE EAST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D
Name: PALKO, KATHERINE DR.
Address: 5753 MIAMI LAKES DRIVE EAST
City-St-Zip: MIAMI LAKES, FL 33014

Title: D
Name: WILLIAMS, STANLEY
Address: 5753 MIAMI LAKES DRIVE EAST
City-St-Zip: MIAMI LAKES, FL 33014

I hereby 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 all other like empowered.

SIGNATURE: DR LEONEL MESA D 05/03/2010
Electronic Signature of Signing Officer or Director — Date