2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N11234 FILED SECRETARY OF STATE 1. Entity Name DIVISION OF CORPCEATIONS JUPITER SHRINE CLUB HOLDING CORPORATION 09 JUN -9 PM 3: 27 Principal Place of Business Mailing Address 20 YACHT CLUB DR 20 YACHT CLUB DR #110 #110 NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142008 Chg-NP CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 14-1955777 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WHITE, ROBERT A. SEC. Street Address (P.O. Box Number is Not Acceptable) 20 YACHT CLUB DR #110 NORTH PALM BEACH, FL 33408 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 300156952703 06/09/09--01040--011 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to . Filing Pee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. mie Change ₩ Delete TILE PRESIDENT JOHNSON, GEORGE NAME NAME DISBENIETT, DOUL 2520 LA CRISTOL CIR. STREET ADDRESS STREET ADDRESS 308 N. DELAUNNE BLYD CITY-ST-ZIP PALM BEACH GARDENS, FL 33470 CITY-ST-ZIP VOICER FY 33458 □/Change DDF Delete TITLE ☐ Addition SNYDER, BLAKE NAME NAME WOHNSON, EFORGE STREET ADORESS 18081 SE COUNTRY CLUB DR. #153 STREET ADDRESS 2520 LA CRISTA CIR CITY-ST-ZP JUPITER, FL 33469 CITY-ST-7/P DOLM BOSES SALDERS, FL STD ☐ Change Addition TITLE Delete TITLE WHITE, RUBERT NAME NAME STREET ADDRESS 20 YACHT CLUB DR., APT 110 STREET ADDRESS CITY-ST-ZIP NORTH PALM BEACH, FL 33408 CITY-ST-ZIP Change | Addition TITLE Delete TITLE FULLER, ROBERT NAME NAME 4368 NICOLE CIRCLE STREET ADDRESS STREET ADORESS CITY-ST-7/P JUPITER, FL 33469 CATY-ST-ZIP TITLE TITLE Change Addition Delete NAME SHONE, FRANK MAME STREET ADDRESS 833 CINNAMON RD STREET ADORESS CITY-ST-7P CITY-ST-ZIP NORTH PALM BEACH, FL 33408 ☐ Change TITLE Delete TITLE Addition CHERRY, RICHARD NAME NAME STREET ADDRESS 419 FORD DR. STREET ADDRESS CITY-ST-7/P ELIZABETHTOWN, PA 17022 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RORPLIA WHITE 5/10/09 561-694-2315

RORPLIA WHITE 5/10/09 561-694-2315

RORPLIA WHITE DOWN PROWNED ON PROWNED TWO STANDS OFFICER OR DIRECTOR

Determine Phone #