

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11496

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: MIDDLE RIVER CLUB, INC.

## Current Principal Place of Business:

3000 N.E. 16TH AVENUE  
OAKLAND PARK, FL 33334

## New Principal Place of Business:

## Current Mailing Address:

3000 N.E. 16TH AVENUE  
OAKLAND PARK, FL 33334

## New Mailing Address:

FEI Number: 59-2021166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FEENAN, NANCY  
3000 N.E. 16TH AVE. 4TH FLOOR  
OAKLAND PARK, FL 33334 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: PD ( ) Delete  
Name: PO BOUCHARD, MARGARET  
Address: 3040 NE 10TH AVE #A310  
City-St-Zip: OAKLAND PARK, FL 33334

Title: VD ( ) Delete  
Name: FEENAN, NANCY  
Address: 3020 NE 16TH AVE. #E208  
City-St-Zip: OAKLAND PARK, FL 33334

Title: TR ( ) Delete  
Name: STRUGAR, BARBARA  
Address: 2970 N.E. 16TH AVE #B112  
City-St-Zip: OAKLAND PARK, FL 33334

Title: SD ( ) Delete  
Name: NOLAN, SANDY  
Address: 2010 NE 16TH AVE  
City-St-Zip: OAKLAND PARK, FL 33334

Title: ASD ( ) Delete  
Name: DORIS, BEAN  
Address: 3050 NW 16TH AVE  
City-St-Zip: OAKLAND PARK, FL 33334

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FEENAN, NANCY  
Address: 3020 N.E. 16TH AVE. #E208  
City-St-Zip: OAKLAND PARK, FL 33334

Title: VD (X) Change ( ) Addition  
Name: WILLARD, HAROLD  
Address: 3060 N.E. 16TH AVE. #H101  
City-St-Zip: OAKLAND PARK, FL 33334

Title: TR (X) Change ( ) Addition  
Name: BOUCHARD, MARGARET  
Address: 3040 N.E. 16TH AVE. #A310  
City-St-Zip: OAKLAND PARK, FL 33334

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: NANCY FEENAN

PD

04/23/2009

Electronic Signature of Signing Officer or Director

Date