2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# N12166

Entity Name: THE JENSEN BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4500 NE OCEAN BLVD.
JENSEN BEACH, FL 349574332

New Principal Place of Business:

Current Mailing Address:

4500 NE OCEAN BLVD.
JENSEN BEACH, FL 349574332

New Mailing Address:

FEI Number: 59-2727149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORNETT, JANE L. (ESQUIRE)
401 EAST OSCEOLA STREET
STUART, FL 34994 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	( ) Delete
Name:	PATRICIA, JOHN	
Address:	4460 NE OCEAN BVLD. #106-B2	
City-St-Zip:	JENSEN BEACH, FL 34957	
Title:	PD	( ) Delete
Name:	MCCLELLAN, MARGE	
Address:	4444 NE OCEAN BLVD G2	
City-St-Zip:	JENSEN BEACH, FL 34957	
Title:	SD	( ) Delete
Name:	SIMONY, CHARLES	
Address:	4484 NE OCEAN BLVD D3	
City-St-Zip:	JENSEN BEACH, FL 34957	
Title:	TD	( ) Delete
Name:	HEMELESKI, TOM	
Address:	4484 NE OCEAN BLVD B3	
City-St-Zip:	JENSEN BEACH, FL 34957	
Title:	VPD	( ) Delete
Name:	CUCINELLI, VITO	
Address:	4428 NE OCEAN BLVD B1	
City-St-Zip:	JENSEN BEACH, FL 34957	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	SIMONY, CHARLES	
Address:	4484NE OCEAN BLVD . D3	
City-St-Zip:	JENSEN BEACH, FL 34957	
Title:	TD	(X) Change ( ) Addition
Name:	TORNATORE, CHARLES	
Address:	4492 NE OCEAN BLVD G1	
City-St-Zip:	JENSEN BEACH, FL 34957	
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: MARGE MCCLELLAN PRES 01/23/2009

Electronic Signature of Signing Officer or Director — Date