

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 10, 2011
Secretary of State

DOCUMENT# N13470

Entity Name: L & F CLUB, INC.**Current Principal Place of Business:**339 NE SANCHEZ AVE
OCALA, FL 34470 US**New Principal Place of Business:****Current Mailing Address:**P O BOX 5424
OCALA, FL 34478 US**New Mailing Address:****FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FOSKEY, DAVID N
1244 NE 7TH TER
OCALA, FL 34470 US**Name and Address of New Registered Agent:**FOSKEY, DAVID N
19 HEMLOCK RADIAL CIR
OCALA, FL 34472 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: _____

08/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: RICKS, JMAES
Address: 617A MIDWAY DR
City-St-Zip: OCALA, FL 34472 US

Title: TRES
Name: BUSCHER, CINDY
Address: 4912 SE 32ND CT
City-St-Zip: OCALA, FL 34480 US

Title: MAL
Name: TEIGEN, THOMAS
Address: PO BOX 536
City-St-Zip: CITRA, FL 32113 US

Title: VP
Name: MOREHOUSE, DONALD
Address: 3216 NE 22CT
City-St-Zip: OCALA, FL 34479 US

Title: MAL
Name: BANKS, DAVID
Address: 4005 NW 19 AVE
City-St-Zip: OCALA, FL 34475 US

Title: SEC
Name: LILLY, DEANNE
Address: 506 NE 10TH AVE
City-St-Zip: OCALA, FL 34470 US

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: NEIL FOSKEY

RA

08/10/2011

Electronic Signature of Signing Officer or Director

Date