2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13508

FILED Apr 23, 2008 Secretary of State

Entity Name: LAKE COUNTY DUPLICATE BRIDGE CLUBS, INC.

Current Principal Place of Business: New Principal Place of Business: 510 WEST KEY AVENUE BOX 1854 EUSTIS, FL 32727 **New Mailing Address: Current Mailing Address:** P O BOX 1854 **BOX 1854** EUSTIS, FL 327278854 US FEI Number: 59-2707901 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: D'OUVILLE, LINDLEY 8021 COVEY CIR MOUNT DORA, FL 32757 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete KRAMER, DONALD KRAMER, DONALD Name: Name: 1841 PARK FOREST RD Address: 1841 PARK FOREST RD Address: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: Title: Title: () Delete (X) Change () Addition ROBIE, JERRY Name: ROSS, EMILY Name: Address: 21133 ROYAL ST GEORGE LN Address: 21133 ROYAL ST GEORGE LN City-St-Zip: LEESBURG, FL 34748 City-St-Zip: PO BOX 1854, FL 32727 Title: () Delete Title: () Change () Addition BRONLEBEN, FRED Name: Name: 4708 SUMMERBIRDGE CIR Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: () Delete Title: () Change () Addition D'OUVILLE, LINDLEY Name: Name: Address: 8021 COVEY CIR Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: Title: () Delete Title: () Change () Addition ELMORE, JERRY Name: Name: 4850 MARSH HARBOR DRIVE Address: Address: City-St-Zip: TAVARES, FL 32788 City-St-Zip: Title: () Delete Title: (X) Change () Addition MILLS ROBERT MILLS, ROBERT Name: Name: Address: 14718 SHAWNEE ST Address: 14718 SHAWNEE ST SORRENTO, FL 32776 SORRENTO, FL 32776 City-St-Zip: 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: LINDLEY D'OUVILLE T 04/23/2008