

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13508

FILED
Feb 10, 2009
Secretary of State

Entity Name: LAKE COUNTY DUPLICATE BRIDGE CLUBS, INC.

Current Principal Place of Business:

510 WEST KEY AVENUE
BOX 1854
EUSTIS, FL 32727 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1854
BOX 1854
EUSTIS, FL 327278854 US

New Mailing Address:

FEI Number: 59-2707901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'OUVILLE, LINDLEY
8021 COVEY CIR
MOUNT DORA, FL 32757 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: VD () Delete
Name: KRAMER, DONALD
Address: 1841 PARK FOREST RD
City-St-Zip: MOUNT DORA, FL 32757

Title: S () Delete
Name: ROSS, EMILY
Address: 21133 ROYAL ST GEORGE LN
City-St-Zip: PO BOX 1854, FL 32727

Title: D () Delete
Name: BRONLEBEN, FRED
Address: 4708 SUMMERBIRDRGE CIR
City-St-Zip: LEESBURG, FL 34748

Title: T () Delete
Name: D'OUVILLE, LINDLEY
Address: 8021 COVEY CIR
City-St-Zip: MOUNT DORA, FL 32757

Title: PD () Delete
Name: ELMORE, JERRY
Address: 4850 MARSH HARBOR DRIVE
City-St-Zip: TAVARES, FL 32788

Title: D () Delete
Name: MILLS, ROBERT
Address: 14718 SHAWNEE ST
City-St-Zip: SORRENTO, FL 32776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MILLS, ROB
Address: 14718 SHAWNEE ST
City-St-Zip: SORRENTO, FL 32776

Title: S (X) Change () Addition
Name: KRAMER, DONALD
Address: 1841 PARK FOREST RD
City-St-Zip: MOUNT DORA, FL 32757

Title: D (X) Change () Addition
Name: JEANNE, CARNEY
Address: 5667 GULF STREAM ST
City-St-Zip: TAVARES, FL 32778

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: ELMORE, JERRY
Address: 4850 MARSH HARBOR DRIVE
City-St-Zip: TAVARES, FL 32778

Title: D (X) Change () Addition
Name: LODEWYCK, FRANK
Address: 26609 WEST COVE DRIVE
City-St-Zip: TAVARES, FL 32778

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

02/10/2009

Electronic Signature of Signing Officer or Director

Date