

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14025

FILED  
Mar 30, 2011  
Secretary of State

**Entity Name:** ABERDEEN GOLF & COUNTRY CLUB, INC.

**Current Principal Place of Business:**

8251 ABERDEEN DR.  
BOYNTON BEACH, FL 33472 US

**New Principal Place of Business:**

**Current Mailing Address:**

8251 ABERDEEN DR.  
BOYNTON BEACH, FL 33472 US

**New Mailing Address:**

**FEI Number:** 65-0704698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORMAN, LARRY ESQ.  
GREENSPOON MARDER, P.A.  
2255 GLADES ROAD - SUITE 414-E  
BOCA RATON, FL 33431 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  
**Name:** KAYNE, HERBERT  
**Address:** 8711 ROTHBURY LANE  
**City-St-Zip:** BOYNTON BEACH, FL 33472 US

**Title:** VP  
**Name:** DORGAN, JAMES  
**Address:** 7764 DORCHESTER ROAD  
**City-St-Zip:** BOYNTON BEACH, FL 33472 US

**Title:** P  
**Name:** KAPLAN, RICHARD A  
**Address:** 8280 MUIRHEAD CIRCLE  
**City-St-Zip:** BOYNTON BEACH, FL 33472 US

**Title:** T  
**Name:** SOLOMON, ARLENE  
**Address:** 8210 HORSESHOE BAY RD  
**City-St-Zip:** BOYNTON BEACH, FL 33472 US

**Title:** D  
**Name:** WOLBERG, LAWRENCE  
**Address:** 7188 SOUTH PORT DR  
**City-St-Zip:** BOYNTON BEACH, FL 33472 US

**Title:** D  
**Name:** POLLOCK, THEODORE  
**Address:** 7711 BRIDLINGTON DR  
**City-St-Zip:** BOYNTON BEACH, FL 33472 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:** ARELENE SOLOMON

T

03/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date