

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14490

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: SPACE COAST TIGER BAY CLUB, INC.

## Current Principal Place of Business:

C/O BRUCE JACOBUS  
2380 BROOKSIDE WAY  
INDIANLANTIC, FL 32903 US

## New Principal Place of Business:

## Current Mailing Address:

C/O BRUCE JACOBUS  
P O BOX 373084  
SATELLITE BCH, FL 32903 US

## New Mailing Address:

FEI Number: 59-2727234      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACOBUS, ALDEN C EXEX. C  
2380 BROOKSIDE WAY  
INDIALANTIC, FL 32903 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: MERRILEES, BOB  
Address: 1735 SHELTER TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: PP ( ) Delete  
Name: SANDERSON, SANDY  
Address: 9001 ELLIS ROAD  
City-St-Zip: W. MELBOURNE, FL 32904 US

Title: P ( ) Delete  
Name: KIRSCHENBAUM, JACK  
Address: 1800 WEST HIBISCUS BLVD.  
City-St-Zip: MELBOURNE, FL 32902 US

Title: PE ( ) Delete  
Name: CAMPANINI, BINO  
Address: 8680 ATLANTIC AVE.  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: S ( ) Delete  
Name: DAVIS, GENE  
Address: 851 PEREGRINE DRIVE  
City-St-Zip: INDIALANTIC, FL 32903 US

Title: T ( ) Delete  
Name: GLOVER, AL  
Address: 6450 RAYBURN ROAD  
City-St-Zip: COCOA, FL 32926 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JACK KIRSCHENBAUM

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date