## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N16338

Entity Name: EAST SIDE CLUB, INC.

FILED Jul 25, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2017 N GOLDENROD STE. 9 ORLANDO, FL 32807 US **New Mailing Address: Current Mailing Address:** 2017 N GOLDENROD ORLANDO, FL 32807 US FEI Number: 59-2762451 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AQUINO, MICHAEL 214 CAPEHART DR. ORLANDO, FL 32807 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: () Change () Addition () Delete AQUINO, MICHAEL, Name: Name: 214 CAPEHART DR. Address: Address: ORLANDO, FL City-St-Zip: City-St-Zip: Title: CD Title: ( ) Delete () Change () Addition BULLEY, BASIL Name: Name: Address: 9940 FLYNT CIR Address: City-St-Zip: ORLANDO, FL 32887 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BARKER, CHARLES D ARLIGNTON, SCOTT D Name: Name: 1811 OUTLINE LN 2017 GOLDENROD AVE Address: Address: City-St-Zip: CHRISTMAS, FL 32709 City-St-Zip: ORLANDO, FL 32825 Title: VD ( ) Delete Title: VC (X) Change ( ) Addition FILEDS, WILLIAM H BROOKS, FRANK Name: Name: 3851 GOLDEN MEADOWS CT 11295 CYPRESS LEAF DR Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: ORLANDO, FL 32825 Title: ( ) Delete Title: (X) Change ( ) Addition PAGE, DIXIE PAGE, DIXIE Name: Name: 18688 12TH ST 18688 12TH ST Address: Address: City-St-Zip: ORLANDO, FL 32833 City-St-Zip: ORLANDO, FL 32833 Title: () Delete Title: ( ) Change (X) Addition BAILEY, KEVIN Name: Name: Address: Address: 1220 LAKE MILLS RD CHULUOTA, FL 32766 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: MICHAEL AQUINO TD 07/25/2007