

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18204

FILED
Apr 06, 2009
Secretary of State

Entity Name: SUNLAKE SOCIAL CLUB, INC.

Current Principal Place of Business:

1335 WARMWOOD DR.
GRAND ISLAND, FL 32735

New Principal Place of Business:

Current Mailing Address:

1335 WARMWOOD DR.
GRAND ISLAND, FL 32735

New Mailing Address:

FEI Number: 59-2745800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIHELIC, CINDY
1335 WARMWOOD DR.
GRAND ISLAND, FL 32735 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: SPOHR, LOIS
Address: 2140 CHESAPEAKE PL.
City-St-Zip: GRAND ISLAND, FL 32735

Title: PD () Delete
Name: GINNY, ROBINSON
Address: 1285 WARMWOOD DR.
City-St-Zip: GRAND ISLAND, FL 32735

Title: VD () Delete
Name: PRINCE, LOUISE
Address: 1660 SHADY LANE
City-St-Zip: GRAND ISLAND, FL 32735

Title: SD () Delete
Name: COLE, ELAINE
Address: 1735 SHADY LN
City-St-Zip: GRAND ISLAND, FL 32735

Title: TD () Delete
Name: MIHELIC, CINDY
Address: 1335 WARMWOOD DR.
City-St-Zip: GRAND ISLAND, FL 32735

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: SPOHR, LOIS
Address: 2140 CHESAPEAKE PLACE
City-St-Zip: GRAND ISLAND, FL 32735

Title: PD (X) Change () Addition
Name: JANE, LAMOY
Address: 2150 CHESAPEAKE PLACE
City-St-Zip: GRAND ISLAND, FL 32735

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

Title: SD (X) Change () Addition
Name: BAUMAN, MARILYN
Address: 1375 WARMWOOD DR.
City-St-Zip: GRAND ISLAND, FL 32735

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: CINDY MIHELIC

TD

04/06/2009

Electronic Signature of Signing Officer or Director

Date