2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# N18625

Entity Name: REBOS CLUB OF NEW SMYRNA BEACH, INC.

Current Principal Place of Business:

2120 S RIDGEWOOD AVE, #7B
EDGEWATER, FL 32141 US

New Principal Place of Business:

Current Mailing Address:

2120 S RIDGEWOOD AVE, #7B
EDGEWATER, FL 32141 US

New Mailing Address:

FEI Number: 59-2914039 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TATRO, BERNARD
2120 S RIDGEWOOD AVE, #7B
EDGEWATER, FL 32132 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: WESTBERRY, ROY
Address: 261 ADAMS STREET
City-St-Zip: OAK HILL, FL 32759 US

Title: SD ( ) Delete
Name: GEBHART, BLAKE
Address: 401 JOYCE STREET
City-St-Zip: EDGEWATER, FL 32132 US

Title: TD ( ) Delete
Name: GEBHART, BRENDA
Address: 401 JOYCE STREET
City-St-Zip: EDGEWATER, FL 32132 US

Title: P ( ) Delete
Name: LEBLANC, DAVID
Address: 432 CAROLYN STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: D ( ) Delete
Name: TATRO, BERNARD
Address: P O BOX 265
City-St-Zip: EDGEWATER, FL 32141 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition
Name: SHARFSTEIN, FRED C
Address: 316 QUAY ASSISI
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: SD (X) Change ( ) Addition
Name: LEBLANC, ROSEMARY
Address: 432 CAROLYN STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: TD (X) Change ( ) Addition
Name: LEBLANC, DAVID
Address: 432 CAROLYN STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

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: FRED C. SHARFSTEIN PRES 02/18/2009
Electronic Signature of Signing Officer or Director — Date