

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18653

FILED
Mar 23, 2009
Secretary of State

Entity Name: COUNTRYSIDE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

600 COUNTRYSIDE DRIVE
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

600 COUNTRYSIDE DRIVE
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-2826101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COUNTRYSIDE GOLF & COUNTRY CLUB
600 COUNTRYSIDE DRIVE
NAPLES, FL 34104 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: P () Delete
Name: MARCIA, FEENEY
Address: 224 COUNTRYSIDE DR
City-St-Zip: NAPLES, FL 34104

Title: T () Delete
Name: HETH, GENE
Address: 422 COUNTRY HOLLOW CT. #E206
City-St-Zip: NAPLES, FL 34104

Title: S () Delete
Name: OLSON, MARY
Address: 132 GRANVILLE CT
City-St-Zip: NAPLES, FL 34104

Title: VP () Delete
Name: FLEMING, RICHARD
Address: 496 VERANDA WAY UNIT F201
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARCIA, FEENEY
Address: 600 COUNTRYSIDE DR
City-St-Zip: NAPLES, FL 34104

Title: T (X) Change () Addition
Name: DOMINICK, FESTA
Address: 600 COUNTRYSIDE DRIVE
City-St-Zip: NAPLES, FL 34104

Title: S (X) Change () Addition
Name: OLSON, MARY
Address: 600 COUNTRYSIDE DR
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change () Addition
Name: SILVA, GERALD
Address: 600 COUNTRYSIDE DRIVE
City-St-Zip: NAPLES, FL 34104

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: MARCIA FEENEY

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date