

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19725

FILED
Mar 20, 2009
Secretary of State

Entity Name: TREASURE COAST RETRIEVER CLUB, INC.

Current Principal Place of Business:

C/O GREG MCGINN
4641 SW BIMINI CIRCLE
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

C/O GREG MCGINN
4641 SW BIMINI CIRCLE
PALM CITY, FL 34990

New Mailing Address:

FEI Number: 59-2827319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGINN, GREG
4641 SW BIMINI CIRCLE N.
PALM CITY, FL 34990 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: BAUGHN, TRENT
Address: 35 SW 24TH RD
City-St-Zip: MIAMI, FL 33129

Title: VP () Delete
Name: CORMIER, SCOTT
Address: 2465 SW VARDON ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: T () Delete
Name: MCGINN, KATHLEEN
Address: 4641 SW BIMINI CIRCLE
City-St-Zip: PALM CITY, FL 34990

Title: S () Delete
Name: CONWAY, DENNIS
Address: 3633 DUNES RD
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: MCGINN, GREG
Address: 4641 SW BIMINI CIR
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: NUQUIST, KIM
Address: 127 E RIVERSIDE DR
City-St-Zip: JUPITER, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BAUGHN, TRENT
Address: 35 SW 24TH RD
City-St-Zip: MIAMI, FL 33129

Title: P (X) Change () Addition
Name: CORMIER, SCOTT
Address: 2465 SW VARDON ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: GREG MCGINN

DIR

03/20/2009

Electronic Signature of Signing Officer or Director

Date