

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26278

FILED
Jan 17, 2009
Secretary of State

Entity Name: SUN DANCERS RADIO CONTROL CLUB, INC.

Current Principal Place of Business:

9639 FAIRWOOD COURT
PORT ST. LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

9639 FAIRWOOD COURT
PORT ST. LUCIE, FL 34986 US

New Mailing Address:

FEI Number: 65-0052303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRIDGES, KENNETH
9639 FAIRWOOD COURT
PORT ST. LUCIE, FL 34986 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: BUZZEO, PAT
Address: 5539 NW WHITECAP ROAD
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VP () Delete
Name: CHIAVERINI, AL
Address: 708 SW MYAKKA RIVER TRACE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: S () Delete
Name: INGRAM, RAYMOND
Address: 5115 SILVER OAK DRIVE
City-St-Zip: FORT PIERCE, FL 34982

Title: T () Delete
Name: BRIDGES, KENNETH
Address: 9639 FAIRWOOD COURT
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D () Delete
Name: FISHER, CHARLIE
Address: 1901 SW CASTINET LANE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D () Delete
Name: GIUFFRE, VINCENT
Address: 1796 SW OAKWOOD ROAD
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WIKOFF, JOHN
Address: 781 NW GRENADA STREET
City-St-Zip: PORT ST. LUCIE, FL 34983

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:

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: KENNETH BRIDGES

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01/17/2009

Electronic Signature of Signing Officer or Director

Date