

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26341

FILED
Feb 01, 2007
Secretary of State

Entity Name: PALATKA COUNTRY CLUB POOL ASSOCIATION, INC.

Current Principal Place of Business:

3400 CRILL AVE POB 1072
% A.W. NICHOLS, III, POB 1072
PALATKA, FL 32178

New Principal Place of Business:

1715 MOSELEY AVE
PALATKA, FL 32177

Current Mailing Address:

P O BOX 1072
PALATKA, FL 32178

New Mailing Address:

FEI Number: 59-2895738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANK, SUSAN
314 SOUTH 8TH STREET
PALATKA, FL 32177 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: SD () Delete
Name: BECKLER, LORI
Address: 2200 PALMA CEIA ST
City-St-Zip: PALATKA, FL 32177

Title: DP () Delete
Name: REID, MARILYN
Address: 3001 TWIGG STREET
City-St-Zip: PALATKA, FL 32177

Title: DS () Delete
Name: FRANK, SUSAN
Address: 314 S 8TH STREET
City-St-Zip: PALATKA, FL 32177

Title: PD () Delete
Name: REID, JIM
Address: 3001 TWIGG STREET
City-St-Zip: PALATKA, FL 32177

Title: VD () Delete
Name: HUDSON, ROBIN
Address: 123 PUTNAM COUNTY BLVD
City-St-Zip: EAST PALATKA, FL 32131

Title: TD () Delete
Name: MUTCHIE, DIANE
Address: 211 PORT COMFORT
City-St-Zip: EAST PALATKA, FL 32131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: REID, JAMES E
Address: 3001 TWIGG STREET
City-St-Zip: PALATKA, FL 32177

Title: D (X) Change () Addition
Name: REID, MARILYN
Address: 3001 TWIGG STREET
City-St-Zip: PALATKA, FL 32177

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 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: JAMES E. REID

PRES

02/01/2007

Electronic Signature of Signing Officer or Director

Date