2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# N28626

Entity Name: EXXONMOBIL RETIREES CLUB OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

EDWARD L. PRESTON
6040 SW 64 AVE
MIAMI, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

EDWARD L. PRESTON
6040 SW 64 AVE
MIAMI, FL 33143 US

New Mailing Address:

FEI Number: 65-0106043 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRESTON, EDWARD L
6040 SW 64 AVE
MIAMI, FL 33143 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: MCCANN, PETER
Address: 5820 SW 87 STREET
City-St-Zip: MIAMI, FL 33143

Title: P ( ) Delete
Name: GUZMAN, JORGE
Address: 7500 SW 162 ST
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: GONZAGA, FRED
Address: 15440 SW 80 AVE.
City-St-Zip: MIAMI, FL 33157

Title: T ( ) Delete
Name: PRESTON, EDWARD L
Address: 6040 SW 64 AVE
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete
Name: HACKETT, ROBERT
Address: 16600 SW 82ND AVE
City-St-Zip: MIAMI, FL 33157

Title: V ( ) Delete
Name: GUERRA, ODETTE
Address: 7711 SW 102 PLACE
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition
Name: ALEXANDER, LYNDA
Address: 836 SW 154 COURT
City-St-Zip: MIAMI, FL 33194

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: P (X) Change ( ) Addition
Name: GUERRA, ODETTE
Address: 7711 SW 102 PLACE
City-St-Zip: MIAMI, FL 33173

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: EDWARD PRESTON T 01/22/2009

Electronic Signature of Signing Officer or Director — Date