

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41076

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** SUNTREE COUNTRY CLUB, INC.

**Current Principal Place of Business:**

ONE COUNTRY CLUB DR.  
MELBOURNE, FL 32940

**New Principal Place of Business:**

**Current Mailing Address:**

ONE COUNTRY CLUB DR.  
MELBOURNE, FL 32940

**New Mailing Address:**

**FEI Number:** 59-3036758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAMONTAGNE, STEVE  
ONE COUNTRY CLUB DR  
MELBOURNE, FL 32940 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: PD  
Name: GAULT, ERNIE  
Address: 1153 BALMORAL WAY  
City-St-Zip: MELBOURNE, FL 32940

Title: VD  
Name: KLEIN, BOB  
Address: 1225 HARBOR TOWN CIRCLE  
City-St-Zip: MELBOURNE, FL 32940

Title: SD  
Name: TENNIAN, PHYLLIS  
Address: 1009 PALM BROOK DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: TD  
Name: STRAUB, BOB  
Address: 839 KERRY DOWNS CIRCLE  
City-St-Zip: MELBOURNE, FL 32940

Title: D  
Name: JENKINS, TOM  
Address: 592 DEERFIELD DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: D  
Name: MORRISON, DONALD  
Address: 2962 BODDINGTON WAY  
City-St-Zip: MELBOURNE, FL 32940

I hereby 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 all other like empowered.

SIGNATURE: STEVE LAMONTAGNE

RA

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date