

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46020

FILED
Apr 21, 2010
Secretary of State

Entity Name: STROKE OF HOPE CLUB, INC.

Current Principal Place of Business:

860 US HWY 1
SUITE 106
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

2560 RCA BLVD.
SUITE 106
PALM BEACH GARDENS, FL 33410 US

Current Mailing Address:

STROKE OF HOPE CLUB
PO BOX 31292
PALM BCH GARDENS, FL 33420 US

New Mailing Address:

FEI Number: 65-0016701 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHILDS, WALTON
115 WATERS EDGE DR.
JUPITER, FL 33477 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
Name: STEINBERG, JORDAN
Address: 2800 N OCEAN DR
City-St-Zip: SINGER ISLAND, FL 33404

Title: D
Name: VURAL, RAY
Address: 6241 WILLOW BEE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: P
Name: CASEY, CHELIE
Address: 10107 HUNT CLUB LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D
Name: BLAKE, LIZANNE
Address: 120 WINTER COURT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D
Name: CHILDS, WALTON
Address: 115 WATERS EDGE DR.
City-St-Zip: JUPITER, FL 33477

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: CHELIE S CASEY

P

04/21/2010

Electronic Signature of Signing Officer or Director

Date