2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000042

FILED Feb 25, 2009 Secretary of State

Entity Name: OSCEOLA COUNTY HUNDRED CLUB, INC. **Current Principal Place of Business: New Principal Place of Business: 8 N STEWART AVE** 2665 HILLIARD CT. KISSIMMEE, FL 34741 KISSIMMEE, FL 34744 **Current Mailing Address: New Mailing Address:** POB 423191 KISSIMMEE, FL 34742 FEI Number: 59-3162288 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MUNTZING, WILLIAM H ROBERTS, TERRY L 1102 W OAK ST 2665 HILLIÁRD CT. KISSIMMEE, FL 34741 KISSIMMEE, FL 34744 US US 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: TERRY LEE ROBERTS 02/25/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WERMUTH, DANIEL Name: Name: 502 NEW YORK AVE Address: Address: City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: Title: () Delete Title: TD (X) Change () Addition ROBERTS, TERRY LEE Name: Name: ROBERTS, TERRY LEE Address: P.O. BOX 420174 N/A Address: 2665 HILLIARD CT. City-St-Zip: KISSIMMEE, FL 34742 City-St-Zip: KISSIMMEE, FL 34744 Title: () Delete Title: () Change () Addition MUNTZING, WILLIAM Name: Name: Address: 1102 OAK ST Address: City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: Title: VD () Delete Title: () Change () Addition POFFENBAUGH, JAMES M Name: Name: Address: 1118 13TH ST Address: City-St-Zip: SAINT CLOUD, FL 34769 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: TERRY LEE ROBERTS TD 02/25/2009