

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002431

FILED
Feb 19, 2009
Secretary of State

Entity Name: BIG BEND SALTWATER CLASSIC FOUNDATION, INC.

Current Principal Place of Business:

2545 BLAIRSTONE PINES DR
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

2545 BLAIRSTONE PINES DR
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3244400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, AARON X
104 DAWN LAUREN LANE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

WEBB, DARREN G
1900 CENTRE POINTE BLVD #176
TALLAHASSEE, FL 32308 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: DARREN G WEBB

02/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CLARKE, MICHELE T III
Address: 1138 S. MAGNOLIA DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: COCD () Delete
Name: WEBB, DARREN
Address: 1900 CENTER POINT BLVD
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD () Delete
Name: O'KELLEY, PATRICK
Address: 2545 BLAIRSTONE PINES DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: T (X) Delete
Name: MITCHELL, AARON X
Address: 104 DAWN LAUREN LANE
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DARREN, WEBB G
Address: 1900 CENTRE POINTE BLVD #176
City-St-Zip: TALLAHASSEE, FL

Title: D (X) Change () Addition
Name: CLARKE, MICHELE T
Address: 1138 S. MAGNOLIA DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change () Addition
Name: O'KELLEY, PATRICK
Address: 2545 BLAIRSTONE PINES DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: () Change () Addition
Name:
Address:
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: DARREN G WEBB

D

02/19/2009

Electronic Signature of Signing Officer or Director

Date