

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004738

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** MEDALIST CLUB ROAD ASSOCIATION, INC.

**Current Principal Place of Business:**

9908 SE COTTAGE LANE  
HOBE SOUND, FL 33455 US

**New Principal Place of Business:**

**Current Mailing Address:**

9908 SE COTTAGE LANE  
HOBE SOUND, FL 33455 US

**New Mailing Address:**

**FEI Number:** 65-0543033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHNEIDER, JACK  
501 N. A1A  
JUPITER, FL 33405 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: EVPD ( ) Delete  
Name: SCHNEIDER, JACK  
Address: 501 NORTH A1A HWY  
City-St-Zip: JUPITER, FL 33477

Title: SD ( ) Delete  
Name: FAIR, IAN  
Address: 404 EAST BAY STREET P O BOX SS-5539  
City-St-Zip: NASSAU, BA

Title: PD ( ) Delete  
Name: NORMAN, GREG  
Address: 501 NORTH A1A HWY  
City-St-Zip: JUPITER, FL

Title: T ( ) Delete  
Name: DAVIS, WYNN  
Address: 501 NORTH A1A HWY  
City-St-Zip: JUPITER, FL 33477

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ( ) 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: JACK SCHNEIDER

EVPD

04/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date