2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000004738

Apr 29, 2009 Secretary of State

Entity Name: MEDALIST CLUB ROAD ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

9908 SE COTTAGE LANE

HOBE SOUND, FL 33455 US

New Mailing Address:

Current Mailing Address: 9908 SE COTTAGE LANE HOBE SOUND, FL 33455

US

2041 VISTA PARKWAY, LEVEL 2

WEST PALM BEACH, FL 33411 US

FEI Number: 65-0543033

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:

SCHNEIDER, JACK JUPITER, FL 33405

501 N. A1A

US

SCHNEIDER, JACK 2041 VISTA PARKWAY, LEVEL 2

WEST PALM BEACH, FL 33411 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: JACK SCHNEIDER

() Delete

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

EVPD

(X) Change () Addition

Name:

Title:

SCHNEIDER, JACK

(X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SCHNEIDER, JACK 501 NORTH A1A HWY

Address: JUPITER, FL 33477 City-St-Zip:

Address: 2041 VISTA PARKWAY, LEVEL 2 City-St-Zip: WEST PALM BEACH, FL 33411

PSD

Title:

Name:

SD

() Delete

Name: FAIR, IAN Name: FAIR, IAN Address: 404 EAST BAY STREET P O BOX 55-5539

Address:

404 EAST BAY STREET P O BOX SS-5539

City-St-Zip: NASSAU, BA City-St-Zip: NASSAU, BA BAHAMAS

Title: (X) Change () Addition

DAVIS, WYNN

Title: () Delete NORMAN, GREG Name: 501 NORTH A1A HWY Address:

Name: Address:

2041 VISTA PARKWAY, LEVEL 2

City-St-Zip: JUPITER, FL City-St-Zip:

WEST PALM BEACH, FL 33411

City-St-Zip:

(X) Delete

Title:

() Change () Addition

Title: Name: DAVIS, WYNN Address:

501 NORTH A1A HWY JUPITER, FL 33477

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 SCHENIDER Electronic Signature of Signing Officer or Director D

04/29/2009

Date