

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004889

FILED
Feb 11, 2009
Secretary of State

Entity Name: JASMINE LAKES CLUB, INC.

Current Principal Place of Business:

6250 SW 47TH CT
FORT LAUDERDALE, FL 33314 FL

New Principal Place of Business:

6250 SW 47TH CT
DAVIE, FL 33314 FL

Current Mailing Address:

6250 SW 47TH CT
FORT LAUDERDALE, FL 33314 FL

New Mailing Address:

6250 SW 47TH CT
DAVIE, FL 33314 FL

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, ZVI
6250 SW 4TH CT
FORT LAUDERDALE, FL 33314 US

Name and Address of New Registered Agent:

LEVIN, ZVI
6250 SW 47TH CT
DAVIE, FL 33314 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:

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: RAGOONAN, SHARON
Address: 6250 SW 47TH CT
City-St-Zip: FORT LAUDERDALE, FL 33314 US

Title: DP () Delete
Name: LEVIN, ZVI
Address: 6250 SW 47TH CT
City-St-Zip: FORT LAUDERDALE, FL 33314 US

Title: DVP () Delete
Name: EVENTAL, MORDECHAY
Address: 6250 SW 47TH CT
City-St-Zip: FORT LAUDERDALE, FL 33314 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: RAGOONAN, SHARON
Address: 6250 SW 47TH CT
City-St-Zip: DAVIE, FL 33314 US

Title: DP (X) Change () Addition
Name: LEVIN, ZVI
Address: 6250 SW 47TH CT
City-St-Zip: DAVIE, FL 33314 US

Title: DVP (X) Change () Addition
Name: EVENTAL, MORDECHAY
Address: 6250 SW 47TH CT
City-St-Zip: DAVIE, FL 33314 US

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: LEVIN ZVI

DP

02/11/2009

Electronic Signature of Signing Officer or Director

Date