

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000714

FILED
Feb 13, 2007
Secretary of State

Entity Name: CHARLOTTE COUNTRY MUSIC CLUB, INC.

Current Principal Place of Business:

C/O SHIRLEY ADEES
PUNTA GORDA, FL 339512746 US

New Principal Place of Business:

Current Mailing Address:

510898
PUNTA GORDA, FL 33951 US

New Mailing Address:

FEI Number: 65-0290398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLAGHER, JOHN
2005 RIVER BASIN DRIVE
PUNTA GORDA, FL 33982 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: P () Delete
Name: GALLAGHER, JOHN
Address: 2005 RIVER BASIN DRIVE
City-St-Zip: PUNTA GORDA, FL 33982

Title: D () Delete
Name: MILLER, GLORIA
Address: 23258 DELAVAN AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D () Delete
Name: LYNN, MARLYS
Address: 822 VIA FORMIA
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: GALLAGHER, LINDA
Address: 2005 RIVER BASIN DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MOORES, MARLYS
Address: 822 VIA FORMIA
City-St-Zip: PUNTA GORDA, FL 33950

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN GALLAGHER

PRES

02/13/2007

Electronic Signature of Signing Officer or Director

Date