

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005036

FILED
Apr 23, 2008
Secretary of State

Entity Name: OCALA DUPLICATE BRIDGE CLUB, INC.

Current Principal Place of Business:

516 NE SANCHEZ AVE
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 6796
OCALA, FL 34478 US

New Mailing Address:

FEI Number: 59-3361589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAPENDICK, DAVID
6975 NW 225A
OCALA, FL 34482 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: VPD () Delete
Name: THORNTON, KENN
Address: 4245 E AERO PL
City-St-Zip: HERNANDO, FL 34442

Title: SEC () Delete
Name: CARR, ANNETTE
Address: 4405 NW 80TH TERRACE
City-St-Zip: OCALA, FL 34482

Title: D () Delete
Name: KUTTAS, GERRY
Address: 4490 NW 84TH TERR
City-St-Zip: OCALA, FL 344822052

Title: TR () Delete
Name: WYATT, RUDOLPH
Address: 16669 SW 43RD TERR
City-St-Zip: OCALA, FL 34473

Title: MGR () Delete
Name: SKAPCZYNSKI, MARGE
Address: 1805 W. GLENEAGLES RD
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: FAYEN, CAROLYN
Address: 13856 SE 86TH CIR
City-St-Zip: SUMMERFIELD, FL 34491

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: PARRISH, HARRY
Address: 8633 SW 92ND ST
City-St-Zip: OCALA, FL 34481

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

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

Title: TR (X) Change () Addition
Name: ST. LOUIS, RON
Address: 8059 SW 108 TH LOOP
City-St-Zip: OCALA, FL 34481

Title: MGR (X) Change () Addition
Name: DUNDKER, BILL
Address: 13808 SW 14TH CIRCLE
City-St-Zip: OCALA, FL 34432

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: DAVID PAPENDICK

PRES

04/23/2008

Electronic Signature of Signing Officer or Director

Date