

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000877

FILED
Feb 09, 2009
Secretary of State

Entity Name: THE COMPUTER CLUB, INC.

Current Principal Place of Business:

1009 N. PEBBLE BEACH BLVD.
SUN CITY CENTER, FL 33573

New Principal Place of Business:

Current Mailing Address:

1009 N. PEBBLE BEACH BLVD.
SUN CITY CENTER, FL 33573

New Mailing Address:

FEI Number: 59-3364313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISCHER, JOHN A
1009 N PEBBLE BEACH BLVD
SUN CITY CENTER, FL 33573 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: D () Delete
Name: ROSE, FORREST
Address: 604 FOX HILLS DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VP () Delete
Name: WEHRIE, BOB
Address: 1142 EMERALD DUNES DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D () Delete
Name: FISCHER, JOHN A
Address: 1701 WEDGE CT.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: SD () Delete
Name: MERRITT, RUSSELL
Address: 913 EL RANCHO DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: PD () Delete
Name: VAN EYCKEN, HAROLD
Address: 2023 PEBBLE BEACH BLVD S
City-St-Zip: SUN CITY CENTER, FL 33573

Title: TD () Delete
Name: COX, JAMES T JR.
Address: 2229 PLATINUM DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

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:

Title: PD (X) Change () Addition
Name: MERRITT, ILONA
Address: 913 EL RANCHO DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

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: JAMES T. COX JR.

TD

02/09/2009

Electronic Signature of Signing Officer or Director

Date