

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90074 037 ****61.25

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1. Entity Name
**THE FLORIDA CLUB PROPERTY OWNERS
ASSOCIATION, INC.**



Principal Place of Business
**9250 ODL ROYAL DR
STUART, FL 34997**

Mailing Address
**BRISTOL MANAGEMENT SERVICES
1930 COMMERCE LANE STE 1
JUPITER, FL 33458**

50001388



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

543 NW LAKE WHITNEY PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 101

City & State

PORT ST LUCIE FL

03192008

Chg-NP

CR2E037 (12/06)

4. FEI Number
65-0727569

Applied For
Not Applicable

Zip

Country

34986

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRISTOL MANAGEMENT SERVICES
1930 COMMERCE LANE, STE 1
JUPITER, FL 33458**

Name

Street Address (P.O. Box Number, etc.)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
PUCCI, TOM
1045 SW BLUE STEM WAY
STUART, FL 34997** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
BOLAND, BRENDA
1309 SW EAGLEN PLACE
STUART, FL 34997** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECY/ASST TR. ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
POLIS, FRANK
868 SW BROMELIA TERR
STUART, FL 34997** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
ROSKEY, CHET
990 SW BALMORAL TR
STUART, FL 34997** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V-PRESIDENT ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREASURER
FRANK CHICOINE
1433 SW BALMORAL TRACE
STUART FLORIDA 34997** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE

Brenda A. Boland

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-08

Date

3-20-08

Daytime Phone #

Brenda A. Boland - Secretary / Asst. Treasurer