2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004979

Apr 27, 2009 Secretary of State

Entity Name: THE FLORIDA CLUB PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9250 ODL ROYAL DR 9250 OLD ROYAL DRIVE STUART, FL 34997 STUART, FL 34997

Current Mailing Address: New Mailing Address:

543 NW LAKE WHITNEY PLACE, STE. 101 PORT SAINT LUCIE, FL 34986

FEI Number: 65-0727569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRISTOL MANAGEMENT SERVICES FOX, WACKEEN, DUNGEY, BEARD, SOBEL, BUSH 1930 COMMERCE LANE, STE 1 3473 SE WILLOUGHBY BLVD JUPITER, FL 33458 STUART, FL 34994

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: FOX, WACKEEN, DUNGEY, BEARD, SOBEL, BUSH 04/27/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BOLAND, BRENDA BOLAND, BRENDA Name: Name:

1309 SW EAGLEN PLACE Address: 1309 SW EAGLEGLEN PLACE Address: STUART, FL 34997 STUART, FL 34997

City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete POLIS, FRANK Name: ROSKEY, CHET Name:

Address: 868 SW BROMELIA TERR Address: 990 SW BALMORAL TRACE

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: () Delete Title: (X) Change () Addition ROSKEY, CHET PUCCI, TOM Name: Name:

990 SW BALMORAL TR 1045 SW BLUE STEM WAY Address: Address: City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: () Delete Title: () Change () Addition

Name: CHICOINE, FRANK Name: Address: 1933 SW BALMORAL TRACE Address: City-St-Zip: STUART, FL 34997 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: CHET ROSKEY Ρ 04/27/2009