

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005948

FILED  
Jan 26, 2012  
Secretary of State

**Entity Name:** CENTRAL FLORIDA GOLF COURSE SUPERINTENDENTS ASSOCIATION INC.

**Current Principal Place of Business:**

5216 HAMMOCK POINT CT  
SAINT CLOUD, FL 34771

**New Principal Place of Business:**

10524 MOSS PARK ROAD  
SUITE 204-334  
ORLANDO, FL 32832 US

**Current Mailing Address:**

PO BOX 620845  
ORLANDO, FL 32862

**New Mailing Address:**

10524 MOSS PARK ROAD  
SUITE 204-334  
ORLANDO, FL 32832 US

**FEI Number:** 91-1931012      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

INNES, JENNIFER  
1296 NE OCEANVIEW CIRCLE  
JENSEN BEACH, FL 34957 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  
Name: GAY, MICHAEL  
Address: 5340 WALKINGHOURSE WAY  
City-St-Zip: OVIEDO, FL 32765

Title: VP  
Name: CRAIG, RICKEY  
Address: 600 E COUNTY ROAD 48  
City-St-Zip: BUSHNELL, FL 33513

Title: D  
Name: ROGERS, DAVID  
Address: 25814 GLENN EAGLE DRIVE  
City-St-Zip: LEESBURG, FL 34748

Title: ST  
Name: HARRIS, BRETT  
Address: 9100 CHILTERN DR.  
City-St-Zip: ORLANDO, FL 32827

Title: D  
Name: FLYNN, CHRIS  
Address: 652 ROARING DR. APT 236  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D  
Name: PATTERSON, REESE  
Address: 15280 BLACK LION WAY  
City-St-Zip: WINTER GARDEN, FL 34787

I hereby 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 all other like empowered.

SIGNATURE: BRETT HARRIS

ST

01/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date