

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000861

FILED
Jan 07, 2012
Secretary of State

Entity Name: EXXONMOBIL TREASURE COAST RETIREES CLUB, INC.

Current Principal Place of Business:

7698 WEXFORD WAY
PORT ST. LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

7698 WEXFORD WAY
PORT ST. LUCIE, FL 34986 US

New Mailing Address:

FEI Number: 65-0767297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNGER, RICK F
7698 WEXFORD WAY
PORT ST. LUCIE, FL 34986 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: HUNGER, RICK F
Address: 7698 WEXFORD WAY
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D
Name: KEHLHEM, ARTHUR W
Address: 2221 SW STARLING DR
City-St-Zip: PALM CITY, FL 34990

Title: S
Name: GUBER, FRED
Address: 8401 SE ANGELINA STREET
City-St-Zip: HOBE SOUND, FL 33455

Title: VP
Name: MELINSKY, EDWARD
Address: 825 NW SORRENTO WAY
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: D
Name: POULIN, CLAUDE
Address: 18600 MISTY LAKE DRIVE
City-St-Zip: JUPITER, FL 33458

Title: T
Name: HAMMERBACHER, JOHN
Address: 3400 S E ASTER LN. APT. 100
City-St-Zip: STUART, FL 34994

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: JOHN HAMMERBACHER

TREA

01/07/2012

Electronic Signature of Signing Officer or Director

Date