

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002557

FILED  
Jan 28, 2009  
Secretary of State

**Entity Name:** DEERFIELD BEACH COMPUTER CLUB, INC.

**Current Principal Place of Business:**

4851 SWANS MANOR  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

4851 SWANS MANOR  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** 65-0833852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COWEN, BARRY  
4851 SWANS MANOR  
COCONUT CREEK, FL 33073 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: PD ( ) Delete  
Name: COWEN, BARRY  
Address: 4851 SWANS MANOR  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD ( ) Delete  
Name: GERSTENBERG, GERRY  
Address: 418 SOUTH CYPRESS ROAD  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VPD ( ) Delete  
Name: DONOVAN, CHARLES J  
Address: 8105 NW 58TH PLACE  
City-St-Zip: TAMARAC, FL 33321

Title: VPD ( ) Delete  
Name: STEIN, HELENE  
Address: 4067 VENTNOR P  
City-St-Zip: DEERFIELD BEACH, FL 33442

**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:

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: CHARLES J DONOVAN

VPD

01/28/2009

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

\_\_\_\_\_  
Date