2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004357

FILED Apr 01, 2009 Secretary of State

Entity Name: CHIEFLAND QUARTERBACK CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 105 E PARK AVE CHIEFLAND, FL 32626 **Current Mailing Address: New Mailing Address:** 105 E PARK AVE CHIEFLAND, FL 32626 FEI Number: 59-3527393 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: BEAUCHAMP, JEFFREY D 105 E PARK AVE CHIEFLAND, FL 32626 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BLITCH, ABRAHAM Name: Name: 13550 NE CR 339 Address: Address: City-St-Zip: TRENTON, FL 32693 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SCHMIDT, DEREK Name: BROOKINS, LORAN Address: 7451 NW 40TH STREET Address: 12351 NW 50 AVENUE City-St-Zip: CHIEFLAND, FL 32626 City-St-Zip: CHIEFLAND, FL 32626 Title: () Delete Title: () Change () Addition TYSON, BECKY Name: Name: Address: 11350 NW 93RD AVENUE Address: City-St-Zip: CHIEFLAND, FL 32626 City-St-Zip: Title: () Delete Title: (X) Change () Addition ALEXANDER, ROB Name: Name: ALEXANDER, ROBERT Address: 10550 NE 10TH AVE Address: 10550 NE 10TH AVE City-St-Zip: CHIEFLAND, FL 32626 City-St-Zip: CHIEFLAND, FL 32626

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: ROBERT ALEXANDER T 04/01/2009