

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005267

FILED
Apr 13, 2009
Secretary of State

Entity Name: JENSEN BEACH COUNTRY CLUB ASSOCIATION, INC.

Current Principal Place of Business:

C/O BRISTOL MGT SVCS
543 NW LAKE WHITNEY PLACE STE 101
PORT SAINT LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

C/O BRISTOL MGT SVCS
543 NW LAKE WHITNEY PLACE STE 101
PORT SAINT LUCIE, FL 34986 US

New Mailing Address:

FEI Number: 65-0891857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNOLLY, HOWARD
4629 NW ROYAL OAK DR
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

DOSS, ARDEN
C/O RENAR HOMES
3731 NE PINEAPPLE AVENUE
JENSEN BEACH, FL 34957 US

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: ARDEN DOSS

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DOSS, ARDEN JR.
Address: 3350 NW ROYAL OAK DRIVE
City-St-Zip: JENSON BEACH, FL 34957

Title: DST () Delete
Name: DOSS, RENEE MOTTRAM
Address: 3350 NW ROYAL OAK DRIVE
City-St-Zip: JENSON BEACH, FL 34957

Title: DVP () Delete
Name: ROWE, RHONDA
Address: 3350 NW ROYAL OAK DR.
City-St-Zip: JENSEN BEACH, FL 34957

Title: D (X) Delete
Name: PENNY, WALTER
Address: 7136 SE OSPREY ST.
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: CONNOLLY, HOWARD
Address: 4629 NW ROYAL OAK DR
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DOSS, ARDEN JR.
Address: 3459 NW ROYAL OAK DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: DST (X) Change () Addition
Name: DOSS, RENEE MOTTRAM
Address: 3459 NW ROYAL OAK DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: DVP (X) Change () Addition
Name: ROWE, RHONDA
Address: 3459 NW ROYAL OAK DR.
City-St-Zip: JENSEN BEACH, FL 34957

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: RENEE DOSS

SECR

04/13/2009

Electronic Signature of Signing Officer or Director

Date