

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003953

FILED
Apr 02, 2011
Secretary of State

Entity Name: COUNTRY CLUB COLONY, INC.

Current Principal Place of Business:

198 JOEL BLVD.
LEHIGH ACRES, FL 33972 US

New Principal Place of Business:

Current Mailing Address:

C/O ROBERT BOWERS ACCOUNTING
PO BOX 159
LEHIGH ACRES, FL 33970 US

New Mailing Address:

1403 ELAINE AVE. N.
LEHIGH ACRES, FL 33971 US

FEI Number: 65-1035904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, SUE
1372 ARCHER ST
UNIT #6
LEHIGH ACRES, FL 33972 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: CURRENTLY, VACANT
Address: 198 JOEL BLVD.
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: S
Name: SMITH, BONNIE
Address: 1380 ARCHER ST UNIT # 6
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: D
Name: BROWN, SUE
Address: 1372 ARCHER ST UNIT #6
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: T
Name: PRICE, GRACIELA
Address: 1403 ELAINE AVE. N.
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: D
Name: THOMAS, JULIE
Address: 194 JOEL BLVD # 2
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: D
Name: BUDDLE, RUTH
Address: 198 JOEL BLVD.
City-St-Zip: LEHIGH ACRES, FL 33936

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: GRACIELA PRICE

T

04/02/2011

Electronic Signature of Signing Officer or Director

_____ Date