2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2009
Secretary of State

DOCUMENT# N99000004937

Entity Name: HUDSON RECREATION CLUB, INC.

Current Principal Place of Business:

7031 SILVER LAKE DR.
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

PO BOX 414
PALATKA, FL 32178

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEREDITH, PAUL M
626 REID STREET
PALATKA, FL 32177 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: PRES ( ) Delete
Name: POIETEVENT, ELAINE
Address: 122 PANTHER TRAIL
City-St-Zip: PALATKA, FL 32177

Title: V-P ( ) Delete
Name: DAWSON, LISA
Address: 100 INDIANA AVE
City-St-Zip: PALATKA, FL 32177

Title: SEC ( ) Delete
Name: GERBICH, CARLA
Address: 2043 FOXWOOD LN.
City-St-Zip: PALATKA, FL 32177

Title: TREA ( ) Delete
Name: RESTOR, DON
Address: PO BOX 972
City-St-Zip: EAST PALATKA, FL 32131

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: TREA (X) Change ( ) Addition
Name: RESTERT, DON
Address: PO BOX 972
City-St-Zip: EAST PALATKA, FL 32131

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: DON C. RESTER TREA 02/26/2009

Electronic Signature of Signing Officer or Director — Date