## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000006717

FILED Apr 22, 2008 Secretary of State

Entity Name: QUARRY CLUB OF DELTONA, FLORIDA, INCORPORATED

	rincipal Place of Business:	New Principal Place	of Business:	
1633 DUB DELTONA	LIN RD. A, FL 32738			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
1633 DUB DELTONA	LIN RD. A, FL 32738			
FEI Number	: FEI Number Applied For	( ) FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and	I Address of Current Registered Ago	ent: Name and Address	of New Registered Agent:	
MOORE, A 1633 DUB DELTONA				
	named entity submits this statement for e of Florida.	or the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Register	red Agent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D ( ) Delete MEEKS, HARRY 2642 GRAMERCY DELTONA, FL 32738	Title: Name: Address: City-St-Zip:	() Change () Addition	
o.t., ot 2.p.				
Title: Name: Address:	D ( ) Delete DEFOE, EMANUEL 436 KETTENING RD DELTONA, FL 32725	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	DEFOE, EMANUEL 436 KETTENING RD	Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	DEFOE, EMANUEL 436 KETTENING RD DELTONA, FL 32725  D () Delete BAKER, DARRYL 690 MALTBY DR. DELTONA, FL 32738  D () Delete MOORE, ARTHUR 1633 DUBLIN RD.	Title: Name: Address: City-St-Zip: Title: Name: Address:	.,	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	DEFOE, EMANUEL 436 KETTENING RD DELTONA, FL 32725  D () Delete BAKER, DARRYL 690 MALTBY DR. DELTONA, FL 32738  D () Delete MOORE, ARTHUR 1633 DUBLIN RD.	Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address:	( ) Change( ) Addition	

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: ARTHUR MOORE D 04/22/2008