2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# P00000037063

Entity Name: CLUBHOUSE INVESTORS, INC.

Current Principal Place of Business:

620 HOLMES BLD
ST AUGUSTINE, FL 32085

New Principal Place of Business:

620 S HOLMES BLVD
ST AUGUSTINE, FL 32084

Current Mailing Address:

3701 GALWAY RD BOX 16
BALLSTON SPA, NY 12020

New Mailing Address:

PO BOX 471
LAKE PLACID, NY 12946

FEI Number: 59-3647817 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIDDE, LYNELLE L
134 FRONTIER DR
PALM COAST, FL 32135 US

Name and Address of New Registered Agent:

RIVETTE, LYNELLE L
620 S HOLMES BLVD
ST AGUSTINE, FL 32084 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: LYNELLE RIVETTE 03/25/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RIVETTE, RONALD M
Address: 134 FRONTIER DR
City-St-Zip: PALM COAST, FL 32135

Title: VP ( ) Delete
Name: HIDDE, LYNELLE L
Address: 134 FRONTIER DR
City-St-Zip: PALM COAST, FL 32135 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: RIVETTE, RONALD M
Address: 620 S HOLMES BLVD
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VP (X) Change ( ) Addition
Name: RIVETTE, LYNELLE L
Address: PO BOX 471
City-St-Zip: LAKE PLACID, NY 12946 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNELLE RIVETTE VP 03/25/2009
Electronic Signature of Signing Officer or Director Date