

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067870

Entity Name: WEKIVA GOLF CLUB, INC.

FILED  
Feb 27, 2009  
Secretary of State

## Current Principal Place of Business:

4100 WEKIVA CLUB CT  
LONGWOOD, FL 32779 US

## New Principal Place of Business:

## Current Mailing Address:

4100 WEKIVA CLUB CT  
SUITE 1101  
LONGWOOD, FL 32779 US

## New Mailing Address:

FEI Number: 20-1049801      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELLO RUSSO, ROBERT G  
531 CODISCO WAY  
SANFORD, FL 32771 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DELLO RUSSO, ROBERT G  
Address: 531 CODISCO WAY  
City-St-Zip: SANFORD, FL 32771 US

Title: D ( ) Delete  
Name: BARTON, HOWARD C  
Address: 3551 WEST 1ST STREET  
City-St-Zip: SANFORD, FL 32771 US

Title: D ( ) Delete  
Name: GATTI, AL  
Address: 600 SWEETWATER CLUB BLVD  
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete  
Name: HOLMES, GARY  
Address: 1900 COUNTRY CLUB BLVD  
City-St-Zip: MOUNT DORA, FL 32757

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

SIGNATURE: ROBERT G DELLO RUSSO

D

02/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date