

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000095276

FILED
Apr 21, 2009
Secretary of State

Entity Name: RUNAWAY BEACH CLUB MANAGEMENT, INC.

Current Principal Place of Business:

3000 BONFIRE BEACH DR
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

3000 BONFIRE BEACH DR
KISSIMMEE, FL 34746

New Mailing Address:

900 E ATLANTIC AVE
SUITE 13
DELRAY BEACH, FL 33483

FEI Number: 25-1920811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICHTMAN, JONATHAN J PA
20283 STATE RD. 7
SUITE 300
BOCA RATON, FL 33498 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: MORRIS, WILLIAM E
Address: 3000 BONFIRE BEACH DR
City-St-Zip: KISSIMMEE, FL 34746

Title: D () Delete
Name: MORRIS, MATHEW
Address: 121 12TH STREET
City-St-Zip: MANHATTAN BEACH, CA 90266

Title: D () Delete
Name: FEIN, JOSHUA
Address: 837 5TH STREET
City-St-Zip: MANHATTAN BEACH, CA 90266

Title: D () Delete
Name: FURLAN, JAMES
Address: 743 MARINE
City-St-Zip: MANHATTAN BEACH, VA 90266

Title: VP (X) Delete
Name: BERKOWITZ, BARRY J
Address: 3000 BONFIRE BEACH DR
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MORRIS, WILLIAM E
Address: 900 E ATLANTIC AVE SUITE 13
City-St-Zip: DELRAY BEACH, FL 33483

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: W MORRIS

MGR

04/21/2009

Electronic Signature of Signing Officer or Director

Date