

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000091948

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** PALMIRA GOLF AND COUNTRY CLUB, INC.

**Current Principal Place of Business:**

28501 MATTEOTTI VIEW  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

28501 MATTEOTTI VIEW  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

**FEI Number:** 26-3501059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAMOUCÉ, MURRELL & GAL, P.A.  
5405 PARK CENTRAL CT  
NAPLES, FL 34109 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: P ( ) Delete  
Name: LENNON, GRACE  
Address: 6405 PARK CENTRAL COURT  
City-St-Zip: NAPLES, FL 34109

Title: VP ( ) Delete  
Name: CORIO, PETER  
Address: 28950 KIRANICOLA COURT  
City-St-Zip: BONITA SPRINGS, FL 34135

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:** GRACE J LENNON

PRES

04/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date