

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 06, 2008
Secretary of State**

DOCUMENT# P15826

Entity Name: CONTINENTAL COUNTRY CLUB REALTY, INC.

Current Principal Place of Business:

50 CONTINENTAL BLVD
WILDWOOD, FL 347856782 US

New Principal Place of Business:

Current Mailing Address:

50 CONTINENTAL BLVD
WILDWOOD, FL 347856782 US

New Mailing Address:

FEI Number: 75-2188155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHINER, EARL
128 FOREST BLVD
WILDWOOD, FL 34785 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHINER, EARL
Address: 128 FOREST BLVD
City-St-Zip: WILDWOOD, FL 34785 US

Title: V () Delete
Name: SNYDER, ANN
Address: 405 ROBIN LANE
City-St-Zip: WILDWOOD, FL 34785 US

Title: T () Delete
Name: HAYES, SAMMIE
Address: 119 ROBIN LANE
City-St-Zip: WILDWOOD, FL 34785 US

Title: S () Delete
Name: TOMASELLO, JOSEPH
Address: 62 SEMINOLE PATH
City-St-Zip: WILDWOOD, FL 34785 US

Title: AS () Delete
Name: PAGAN, CHALEAH
Address: PO BOX 982
City-St-Zip: BUSHNELL, FL 33513 US

Title: D () Delete
Name: DELEMATER, EDITH
Address: 503 FOREST BLVD
City-St-Zip: WILDWOOD, FL 34785

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:

Title: AS (X) Change () Addition
Name: PEEVERS, DOREEN
Address: 113 BIG OAK LANE
City-St-Zip: WILDWOOD, FL 34785 US

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: EARL SHINER

P

08/06/2008

Electronic Signature of Signing Officer or Director

Date