

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000077824

Entity Name: ANTIGUA CLUB, INC.

FILED  
Apr 21, 2005  
Secretary of State

## Current Principal Place of Business:

2221 LEE ROAD  
SUITE 28  
WINTER PARK, FL 32789 US

## Current Mailing Address:

2221 LEE ROAD  
SUITE 28  
WINTER PARK, FL 32789 US

## New Principal Place of Business:

650 S. NORTHLAKE BLVD.  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 US

## New Mailing Address:

650 S. NORTHLAKE BLVD.  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-3283126

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LECCESE, JACQUELINE  
2221 LEE ROAD  
SUITE 28  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

LECCESE, JACQUELINE  
650 S. NORTHLAKE BLVD  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 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:

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COSCIA LECCESE, JACQUELINE  
Address: 2221 LEE ROAD SUITE #28  
City-St-Zip: WINTER PARK, FL 32789

Title: VST ( ) Delete  
Name: DELGUIDICE, CHRISTOPHER  
Address: 474 S. NORTH LAKE BLVD., STE. 1020  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: V ( ) Delete  
Name: LECCESE, SALVADOR F  
Address: 2221 LEE ROAD, STE. 28  
City-St-Zip: WINTER PARK, FL 32789

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LECCESE, JACQUELINE C  
Address: 650 S. NORTHLAKE BLVD. SUITE 450  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP (X) Change ( ) Addition  
Name: GROSCH, FRANK K  
Address: 650 S. NORTHLAKE BLVD, SUITE 450  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP (X) Change ( ) Addition  
Name: LECCESE, SALVADOR F  
Address: 650 S. NORTHLAKE BLVD, SUITE 450  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACQUELINE C. LECCESE

PRES

04/21/2005

Electronic Signature of Signing Officer or Director

Date