## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000077826

Entity Name: MAITLAND CLUB, INC.

FILED Apr 21, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2221 LEE ROAD, SUITE 28 650 S. NORTHLAKE BLVD.

WINTER PARK, FL 32789 US SUITE 450

ALTAMONTE SPRINGS, FL 32701 US

**Current Mailing Address:** New Mailing Address:

650 S. NORTHLAKE BLVD. 2221 LEE ROAD, SUITE 28

SUITE 450 WINTER PARK, FL 32789 US

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-3283499 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

LECCESE, SALVADOR F LECCESE, SALVADOR F 2221 LEE ROAD, SUITE 28 WINTER PARK, FL 32789 650 S. NORTHLAKE BLVD

US 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition LECCESE, JACQUELINE C LECCESE, JACQUELINE C Name: Name: Address: Address:

2221 LEE ROAD, SUITE 28 650 S. NORTHLAKE BLVD, SUITE 450 City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: VΡ Title: () Delete (X) Change ( ) Addition

Name: DELGUIDICE, CHRISTOPHER Name: GROSCH, FRANK K

474 S NORTH LAKE BLVD STE 1020 650 S. NORTHLAKE BLVD, SUITE 450 Address: Address: ALTAMONTE SPRINGS, FL 32701 ALTAMONTE SPRINGS, FL 32701 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition

LECCESE, SALVADOR F LECCESE, SALVADOR F Name: Name:

2221 LEE ROAD, SUITE 28 650 S. NORTHLAKE BLVD. SUITE 450 Address: Address: City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

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