




# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 28, 2004 8:00 am**  
**Secretary of State**

01-28-2004 90007 019 \*\*\*150.00

<b>DOCUMENT # P95000014454</b> 1. Entity Name <b>COUNTRY CLUB CAFE, INC.</b>					
Principal Place of Business <b>3399 SE GOLF TRAIL STUART FL 34997</b>				Mailing Address <b>3399 SE GOLF TRAIL STUART FL 34997</b>	
2. Principal Place of Business <b>2000 SE St Lucia</b> Suite, Apt. #, etc. <b>Alid</b>		3. Mailing Address Suite, Apt. #, etc. 		 <b>MOORE CR2E034 (11/03)</b>	
City & State <b>STUART FL</b>		City & State 			
Zip <b>34994</b>		Country <b>Martin</b>			
4. FEI Number <b>65-0557408</b>		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				 <b>MOORE CR2E034 (11/03)</b>	
6. Name and Address of Current Registered Agent <b>CLAYTON, CHARLOTTE C. 309 PELICAN DRIVE STUART FL 34996</b>					
7. Name and Address of New Registered Agent Name <b>John F Clayton</b> Street Address (P.O. Box Number is Not Acceptable) <b>3399 SE GOLF TRAIL</b> City <b>STUART</b> <b>FL</b> Zip Code <b>34997</b>					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <b>John F. Clayton</b> <b>John F. Clayton</b> <b>1-22-04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <small>DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	
	PD	CLAYTON, JOHN F	1104 EAST DOLPHIN DRIVE	STUART FL 34996	
	VD	RIZZI, VITRO	45 N OCEAN AVE	STUART FL 34996	
	ST	WILGENKAMP, KATHLEEN	10600 S OCEAN DR APT G4	JENSEN BEACH FL 34957	
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <b>John F. Clayton</b> <b>President</b> <b>1-22-04</b> <b>772-287-4111</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>					