

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N08773

Entity Name: COUNTRY CLUB ESTATES COOPERATIVE, INC.

Current Principal Place of Business:

700 N WATERWAY
VENICE, FL 34285

Current Mailing Address:

COUNTRY CLUB ESTATES
700 N WATERWAY
VENICE, FL 34285

FEI Number: 59-2653265

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCOTT, GORDON ESQ.
ONE SARASOTA TOWER
TWO NORTH TAMiami TRAIL SUITE 500
SARASOTA, FL 34236-5575 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: SCOTT GORDON

11/01/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LOCKE, FRAN
Address 609 LEISURE
City-State-Zip: VENICE FL 34285

Title DIRECTOR, SECRETARY
Name LINDA, ROE
Address 801 TURF
City-State-Zip: VENICE FL 34285

Title DIRECTOR, PRESIDENT
Name ZIEMBA, JOHN
Address 735 S. GREEN CIRCLE
City-State-Zip: VENICE FL 34285

Title DIRECTOR, TREASURER
Name VOGEL, SAMUEL
Address 727 S WATERWAY
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name WILLECKE, RICHARD
Address 802 S WATERWAY
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name EVANS, RICHARD
Address 813 STYMIE
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name KRUBL, JOSEPH
Address 724 S GREEN CIRCLE
City-State-Zip: VENICE FL 34285

Title DIRECTOR, VP
Name WEST, JIM
Address 771 N. GREEN CIRCLE
City-State-Zip: VENICE FL 34285

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA ROE

SECRETARY

11/01/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CROSSLAND, EUGENE
Address	426 W LAKE VALLEY DRIVE
City-State-Zip:	HAZELTON PA 18202