

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17821

Entity Name: OLD MARSH GOLF CLUB, INC.**Current Principal Place of Business:**7500 OLD MARSH ROAD
PALM BEACH GARDENS, FL 33418**Current Mailing Address:**7500 OLD MARSH ROAD
PALM BEACH GARDENS, FL 33418**FEI Number:** 59-2746012**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MENERY, MICHAEL
7500 OLD MARSH ROAD
PALM BEACH GARDENS, FL 33418 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	BROWNING, MICHAEL
Address	100 LAKESHORE DRIVE, L-12
City-State-Zip:	PALM BEACH FL 33408

Title	VP/TREASURER
Name	CAMMARANO, NICK
Address	117 MONTE CARLO DRIVE
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	SECRETARY
Name	REILLY, BRIAN
Address	13061 OAKMEADE
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	PRESIDENT
Name	SIEGEL, PHILIP
Address	13181 MARSH LANDING
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	VP
Name	PALUMBO, LISA
Address	242 VIA LINDA
City-State-Zip:	PALM BEACH FL 33480

Title	DIRECTOR
Name	TAYLOR, RICHARD
Address	13040 SABAL CHASE
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	DIRECTOR
Name	CLIFT, DALE
Address	13361 MARSH LANDING
City-State-Zip:	PALM BEACH GARDENS FL 33418

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: PHILIP SIEGEL**PRESIDENT****04/29/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date