## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01320

City-St-Zip:

Entity Name: OAKS CLUB CORPORATION

FILED Jul 05, 2006 Secretary of State

Entity Name: OAKS CLUB CORPORATION			
Current Principal Place of Business:		New Principal Place of Business:	
301 MACE OSPREY,	WEN DRIVE FL 34229		
Current Mailing Address:		New Mailing Address:	
1818 AUSTRALIAN AVENUE SOUTH SUITE 400 W. PALM BEACH, FL 33409			
In accordan	: 59-2369514 FEI Number Applied For() FEI No ce with s. 607.193(2)(b), F.S., the corporation did not received Address of Current Registered Agent:	' <del>-</del> '	
1818 AUS SUITE 400 WEST PAI	LM BEACH, FL 33409 US named entity submits this statement for the purpose	of changing	its registered office or registered agent, or both,
	e of Florida.		
SIGNATU	RE: Electronic Signature of Registered Agent		 Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) Delete COOPER, SANFORD 301 MACEWEN DRIVE OSPREY, FL 34229	Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition HOY, JAMES 301 MACEWEN DRIVE OSPREY, FL 34229
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	T ( ) Change (X) Addition PETTEGREW, EDWARD 301 MACEWEN DRIVE OSPREY, FL 34229
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	VP ( ) Change (X) Addition BAROCH, JEROME 301 MACEWEN DRIVE OSPREY, FL 34229
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	S ( ) Change (X) Addition MCLAUGHLIN, MICHAEL 301 MACEWEN DRIVE OSPREY, FL 34229
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition WILLIAMS, ROGER 301 MACEWEN DRIVE OSPREY, FL 34229
Title: Name:	( ) Delete	Title: Name:	D ( ) Change (X) Addition STEWART, DAVID 301 MACEWEN DRIVE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: OSPREY, FL 34229

SIGNATURE: JAMES HOY P 07/05/2006