

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000005502

**FILED**  
**Aug 19, 2013**  
**Secretary of State**  
**CC5662881467**

**Entity Name:** MALONE COMMUNITY CLUB, INCORPORATED

**Current Principal Place of Business:**

5186 9TH AVE  
MALONE, FL 32445

**Current Mailing Address:**

P O BOX 25  
MALONE, FL 32445 US

**FEI Number: 59-3095483**

**Certificate of Status Desired: Yes**

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

SMITH, WILLIE J  
5330 12TH STREET  
MALONE, FL 32445 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 MR  
Name MCKAY, SAMUEL  
Address 4965 KILLIS RD.  
City-State-Zip: GREENWOOD FL 32443

Title MR  
Name TORRES, NORMAN A  
Address 5315 12TH ST.  
City-State-Zip: MALONE FL 32445

Title MRS  
Name SMITH, KATHLEAN  
Address PO BOX 176  
City-State-Zip: MALONE FL 32445

*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: MCKAY , SAMUEL**

**PRESIDENT**

**08/19/2013**

Electronic Signature of Signing Officer/Director Detail

Date