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Feb 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 517931 (2)

1. Corporation Name
OLYMPUS CLUB, INC.



Principal Place of Business Mailing Address
2600 LANTANA ROAD
LANTANA FL 33462
C/O BJB PROPERTIES, INC. C/O BJB PROPERTIES, INC.

2. Principal Place of Business 2a. Mailing Address
21 1601 FORUM PLACE 26 310 WILMA CIRCLE
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 SUITE 805 27 NA
City & State City & State
23 WEST PALM BEACH, FL 28 RIVIERA BEACH
Zip Country Zip Country
24 33401 25 PALM BCH 29 33404 30 PALM BEACH

3. Date Incorporated or Qualified 11/04/1976 3a. Date of Last Report 01/23/1996
4. FEI Number 59-1702625 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

O'CONNELL, BRIAN M.
BOOSE CASEY CIKLIN, ET AL
515 N. FLAGLER DR., SUITE 1800
W. PALM BCH. FL 33401

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent or director if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	BOGATIN, HENRY D.	1.2 NAME	KAHANE, ELLEN KATE
STREET ADDRESS	2600 LANTANA ROAD	1.3 STREET ADDRESS	3575 S. OCEAN BLVD.
CITY - ST - ZIP	LANTANA FL	1.4 CITY - ST - ZIP	PALM BEACH, FL
TITLE	VD	2.1 TITLE	
NAME	JAFFE, BETTY ANN	2.2 NAME	
STREET ADDRESS	2600 LANTANA RD	2.3 STREET ADDRESS	3575 S. OCEAN BLVD.
CITY - ST - ZIP	LANTANA FL	2.4 CITY - ST - ZIP	PALM BEACH, F
TITLE	ST	3.1 TITLE	
NAME	BOGATIN, GERTRUDE	3.2 NAME	
STREET ADDRESS	3575 S. OCEAN BLVD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	PALM BEACH FL	3.4 CITY - ST - ZIP	
TITLE	STD	4.1 TITLE	STD
NAME	KAHANE, ELLEN KATE	4.2 NAME	BOGATIN, HENRY
STREET ADDRESS	2600 LANTANA RD.	4.3 STREET ADDRESS	3575 S. OCEAN BLVD.
CITY - ST - ZIP	LANTANA FL	4.4 CITY - ST - ZIP	PALM BEACH, FL
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ellen Kahane, PRES 1/29/97 (561) 734-0606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (9/96)