FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 700005 (2)

1. Corporation Name

PEACE RIVER AND PALM SHORES SOCIAL CLUB, INC.

Principal Place of Business	Mailing Address
29075 RIVERVIEW LANE PUNTA GORDA FL 33982-8535	29075 RIVERVIEW LANE PUNTA GORDA FL 33982-8535

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/04/1969
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2344981 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

9. Name and Address of Current Registered Agent

BROWN, R. RODNEY
29095 RIVERVIEW LANE
PUNTA GORDA FL 33982

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	HAYDEN, JOHN J.	12 NAME	
STREET ADDRESS	261 SUMMERSET DR.	13 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	CONKRIGHT, TERRY	22 NAME	
STREET ADDRESS	28482 COCO PALM DR.	23 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	24 CITY-ST-ZIP	
TITLE	TD	31 TITLE	☐ Change ☐ Addition
NAME	MOHLMASTER, DONALD	32 NAME	
STREET ADDRESS	155 SUMMERSET DR	33 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	34 CITY-ST-ZIP	
TITLE	~~D~~	41 TITLE	P ☒ Change ☐ Addition
NAME	~~UBEL, JACK~~	42 NAME	Ella Donohue
STREET ADDRESS	~~28280 COCO PALM DR.~~	43 STREET ADDRESS	195 Summerset Drive
CITY-ST-ZIP	~~PUNTA GORDA FL~~	44 CITY-ST-ZIP	Punta Gorda, FL 33982
TITLE	SD	51 TITLE	☐ Change ☐ Addition
NAME	RHODES, SUSAN	52 NAME	
STREET ADDRESS	459 RIDGECREST DR.	53 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	54 CITY-ST-ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	RHODES, RICKY L	62 NAME	
STREET ADDRESS	459 RIDGECREST DR.	63 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Susan Rhodes (SUSAN RHODES) Secretary 3/27/95 813-627-2567
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0061894