


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

04-07-2004 90052 040 \*\*\*\*61.25

|   |         |   |               |
|---|---------|---|---------------|
| <b>DOCUMENT # 712555</b>  |         |  |               |
| 1. Entity Name<br><b>AMERICAN-GERMAN CLUB, INC.</b>                             |         |   |               |
| Principal Place of Business<br><b>5111 LANTANA ROAD<br/>LAKE WORTH FL 33463</b> |         | Mailing Address<br><del>P.O. BOX 5378<br/>LAKE WORTH FL 33466-5976<br/>US</del>   |               |
| 2. Principal Place of Business  |         | 3. Mailing Address<br><b>5111 LANTANA ROAD</b>                                    |               |
| Suite, Apt. #, etc.   |         | Suite, Apt. #, etc.   |               |
| City & State  |         | City & State<br><b>LAKE WORTH, FL.</b>  |               |
| Zip   | Country | Zip   | Country       |
| <b>33463</b>  |         | <b>33463</b>  | <b>U.S.A.</b> |

**54028211**



MOORE CR2E037 (11/03)

|   |  |  |  |  |  |    |                          |
|---|--|--|--|--|--|----|--------------------------|
| 6. Name and Address of Current Registered Agent                             |  |  |  | 7. Name and Address of New Registered Agent        |  |    |                          |
| <del>FOSTER, THOMAS<br/>27 FOREST HILLS CLANE<br/>BOCA RATON FL 33431</del> |  |  |  | Name<br><b>WERNER MUELLER</b>                      |  |    |                          |
|   |  |  |  | Street Address (P.O. Box Number is Not Acceptable) |  |    |                          |
|   |  |  |  | <b>7465 BRUNSWICK CIRCLE</b>                       |  |    |                          |
|   |  |  |  | City<br><b>BOYNTON BEACH</b>                       |  | FL | Zip Code<br><b>33437</b> |

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE WERNER MUELLER - PRESIDENT *W. Mueller* 03 APRIL 04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

|  |  |                                    |  |
|--|--|------------------------------------|--|
| <b>FILE NOW: FEE IS \$61.25<br/>Due By May 1, 2004</b> | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | <b>\$5.00</b> May Be Added to Fees | <b>Make Check Payable to Florida Department of State</b> |
|--|--|------------------------------------|--|

| 10. OFFICERS AND DIRECTORS |                          |  |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |                            |  |  |
|----------------------------|--------------------------|--|--|---|----------------------------|--|--|
| TITLE                      | V                        | <input checked="" type="checkbox"/> Delete |  | TITLE   | VICE PRESIDENT             | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition            |
| NAME                       | LUX, ANTON               |  |  | NAME  | G.M. SCHMITT               |  |  |
| STREET ADDRESS             | 1000 SW 26TH AVE         |  |  | STREET ADDRESS  | 253 BRIER CIRCLE           |  |  |
| CITY-ST-ZIP                | BOYNTON BEACH FL 33426   |  |  | CITY-ST-ZIP   | JUPITER, FL. 33458         |  |  |
| TITLE                      | T                        | <input checked="" type="checkbox"/> Delete |  | TITLE   | TREASURER                  | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition            |
| NAME                       | RINGER, SHIRLEY          |  |  | NAME  | LUTERAN, HELEN             |  |  |
| STREET ADDRESS             | 88 CUYAHOGA ROAD         |  |  | STREET ADDRESS  | 190 CITRUS TRAILS CIRCLE   |  |  |
| CITY-ST-ZIP                | LAKE WORTH FL            |  |  | CITY-ST-ZIP   | BOYNTON BEACH, FL. 33436   |  |  |
| TITLE                      | D                        | <input checked="" type="checkbox"/> Delete |  | TITLE   | DIRECTOR                   | <input type="checkbox"/> Change            | <input checked="" type="checkbox"/> Addition |
| NAME                       | SCHAFFHAUSER, JACK       |  |  | NAME  | FREITER, KURT              |  |  |
| STREET ADDRESS             | 7273 CATALINA ISLE DRIVE |  |  | STREET ADDRESS  | 12710 HEADWATER CIRCLE     |  |  |
| CITY-ST-ZIP                | LAKE WORTH FL 33467      |  |  | CITY-ST-ZIP   | WEST PALM BEACH, FL. 33414 |  |  |
| TITLE                      | D                        | <input type="checkbox"/> Delete            |  | TITLE   | DIRECTOR                   | <input type="checkbox"/> Change            | <input checked="" type="checkbox"/> Addition |
| NAME                       | WLOSIK, FRANK            |  |  | NAME  | FINKE, PAUL                |  |  |
| STREET ADDRESS             | 7227 LUGANO DR           |  |  | STREET ADDRESS  | 1320 SW. 25TH WAY          |  |  |
| CITY-ST-ZIP                | BOYNTON BEACH FL 33437   |  |  | CITY-ST-ZIP   | BOYNTON BEACH, FL. 33426   |  |  |
| TITLE                      | S                        | <input type="checkbox"/> Delete            |  | TITLE   | DIRECTOR                   | <input type="checkbox"/> Change            | <input checked="" type="checkbox"/> Addition |
| NAME                       | WACKER, BRENT            |  |  | NAME  | RADUN, ARTUR               |  |  |
| STREET ADDRESS             | 9392 PINTO DR            |  |  | STREET ADDRESS  | 6723 S. CALUMET CIRCLE     |  |  |
| CITY-ST-ZIP                | LAKE WORTH FL 33467      |  |  | CITY-ST-ZIP   | LAKE WORTH, FL. 33463      |  |  |
| TITLE                      | D                        | <input checked="" type="checkbox"/> Delete |  | TITLE   |                            | <input type="checkbox"/> Change            | <input type="checkbox"/> Addition            |
| NAME                       | KING, GARY               |  |  | NAME  |                            |  |  |
| STREET ADDRESS             | 26 VISTA DEL RIO         |  |  | STREET ADDRESS  |                            |  |  |
| CITY-ST-ZIP                | BOYNTON BEACH FL 33426   |  |  | CITY-ST-ZIP   |                            |  |  |

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WERNER MUELLER - PRESIDENT *W. Mueller* 03 APRIL 04 561-738-0896  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #