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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **732220**

1. Corporation Name

The Charlotte Promenaders Square Dance Club INC

Principal Place of Business

22486 Adorn Ave
 Port Charlotte FL 33952
 US

Mailing Address

22486 Adorn Ave
 Port Charlotte FL 33952
 US

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21

26

03/20/1975

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

Applied For

22

27

59-1645327

Not Applicable

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23

28

Zip

Country

Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Brokmeier, Fred
 22486 Adorn Ave
 Port Charlotte FL 33952

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

Fred Brokmeier T

03 / 04 , 99

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T DELETE

NAME: Brokmeier, Fred
 STREET ADDRESS: 22486 Adorn Ave
 CITY-ST-ZIP: Port Charlotte FL 33952

1.1 TITLE Change Addition

P DELETE

NAME: Bildstein, Trudy
 STREET ADDRESS: 22291 Queens Ave
 CITY-ST-ZIP: Port Charlotte FL 33941

2.1 TITLE Change Addition

S DELETE

NAME: Vredevoogd, Doris
 STREET ADDRESS: 2399 Bendway Dr.
 CITY-ST-ZIP: Port Charlotte FL 33948

3.1 TITLE Change Addition

D DELETE

NAME: Miller, Arthur
 STREET ADDRESS: 1832 Nurenberg Blvd
 CITY-ST-ZIP: Port Charlotte FL 33983

4.1 TITLE Change Addition

D DELETE

NAME: Wallace, Royce
 STREET ADDRESS: 22392 ~~Port Charlotte FL 33952~~
 CITY-ST-ZIP: Port Charlotte FL 33952

5.1 TITLE Change Addition

D DELETE

NAME: Ortel, Howard
 STREET ADDRESS: na (P.O.Box 67)
 CITY-ST-ZIP: Ford Oorden FL 33842

6.1 TITLE Change Addition

14. 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 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, with all other like empowered.

SIGNATURE:

Fred Brokmeier

03/04, 99

941 629 7378

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)