## **FILE NOW: FILING FEE IS \$61.25**

**FILED NONPROFIT** FLORIDA DEPARTMENT OF STATE Mar 16 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 733675 (3)NATIVITY MEN'S CLUB OF THE CHURCH OF THE NATIVIT Y, INC. Principal Place of Business Mailing Address 5220 JOHNSON STREET 5220 JOHNSON STREET 3. Date Incorporated or Qualified HOLLYWOOD FL 33021-5720 HOLLYWOOD FL 33021-5720 08/25/1975 4. FEI Number Applied For 59-1649528 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 Yes Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name SCHLICHTE, PAUL G. Street Address (P.O. Box Number is Not Acceptable) 2134 HOLLYWOOD BLVD. 83 HOLLYWOOD FL 33020 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 eigent, 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 objection 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD DELETE Change Addition TITLE 1.5 TITLE WILLIAMS, JIM NAME 1.2 NAME 5441 BUCHANAN ST. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE **VDT** 2.1 TITLE Change **BUONOMO, CARL** NAME 2.2 NAME **5030 POLK STREET** STREET ADDRESS 2.3 STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE SD 3.1 TITLE Change Addition CALLAHAN, MIKE NAME 3.2 NAME STREET ADDRESS 4720 MADISON ST. 3.3 STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition JOHN CASPANELLO 3PIS cleveland ST NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS Hollywood FL33021 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE Change ☐ Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CiTY-ST-ZIP CITY-ST-ZIP

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.

SIGNATURE: