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Mar 04 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 759153 (0)

1. Corporation Name
SAFETY HARBOR CLUB, INC.



Principal Place of Business #1 HARBOR BEND DRIVE P.O. BOX 2276 PINELAND FL 33945-9276	Mailing Address #1 HARBOR BEND DRIVE P.O. BOX 2276 PINELAND FL 33945
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3. Date Incorporated or Qualified 07/13/1981	3a. Date of Last Report 03/06/1996
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-2196960	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**HUNT, JACK A.
#6 Joses Hideaway
SAFETY HARBOR CLUB
PINELAND FL 33945**

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 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	ZIMMERMAN, SAM
STREET ADDRESS	49 EAST RIVER RD
CITY-ST-ZIP	RUMSON NJ
TITLE	D <input type="checkbox"/> DELETE
NAME	COTTONE, ANTHONY
STREET ADDRESS	140 HARBOR
CITY-ST-ZIP	HEAD OF THE HARBOR NY
TITLE	D <input type="checkbox"/> DELETE
NAME	MCLEAN, EMILY
STREET ADDRESS	1063 DAQWICK CT
CITY-ST-ZIP	ST LOUIS MO
TITLE	S <input type="checkbox"/> DELETE
NAME	OSBORN, ZEBULON
STREET ADDRESS	19045 LAKE SWATARA DR
CITY-ST-ZIP	EUSTIS FL
TITLE	DM <input type="checkbox"/> DELETE
NAME	HUNT, JACK
STREET ADDRESS	#6 JOSE'S HIDEWAY
CITY-ST-ZIP	PINELAND FL
TITLE	T <input type="checkbox"/> DELETE
NAME	TUCHI, JAMES
STREET ADDRESS	62 PENNINGTON RD.
CITY-ST-ZIP	NEW BRUNSWICK NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Emily McLean
3.3 STREET ADDRESS	11 Ridge Line Dr.
3.4 CITY-ST-ZIP	St. Louis, MO 63122
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	William J. St. John, Jr.
4.3 STREET ADDRESS	22 Kettle-town Woods Rd.
4.4 CITY-ST-ZIP	Southbury, CT 06488
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **J. A. Hunt** 2/14/97 (941) 472-1019
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0079530

CR2E037 (9/96)

D
Larry Blevins
7700 N. Hazelwood Dr.
Lincoln, NE 68510

D
Alan Martin
4541 Harbordend Dr.
Pineland, FL 33945

V
Joe Silverstein
543 North St.
New Bedford, MA 02740

D
John Loesch
2100 East 35th St.
Joplin, MO 64804

D
Ralph Cusick
1440 New York Ave. NW
Washington, DC 20005

D
Betty Mortimer
20 Buttonball Lane
Weston, CT 06883

D
Bill St. John
22 Kettletown Woods Rd.
Southbury, CT 06488

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/>
2.2 NAME	Beverly Holley
2.3 STREET ADDRESS	386 Westwinds Dr.
2.4 CITY-ST-ZIP	Palm Harbor, FL 34683
3.1 TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/>
3.2 NAME	Joe Silverstein
3.3 STREET ADDRESS	130 Clarendon St.
3.4 CITY-ST-ZIP	N. Dartmouth, MA 02747
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/>
4.2 NAME	John Loesch
4.3 STREET ADDRESS	POB 3006
4.4 CITY-ST-ZIP	Pineland, FL 33945
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	
1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/>
1.2 NAME	Phil Yarnell
1.3 STREET ADDRESS	POB 329
1.4 CITY-ST-ZIP	Pineland, FL 33945
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/>
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	