

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **762749** (0)

1. Corporation Name

THE DUGOUT CLUB, INCORPORATED

Principal Place of Business

Mailing Address

VFW POST 3588
1114 N DIXIE HWY
LAKE WORTH FL 33460

VFW POST 3588
1114 N DIXIE HWY
LAKE WORTH FL 33460



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 04/06/1982	3a. Date of Last Report 08/01/1995
21	26	4. FEI Number 59-2153976	Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>
22	27	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	29	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YURCH, JOHN J
6968 ATHENA DR
LAKE WORTH FL 33463

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

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	
TITLE	SD	1.1 TITLE	VD
NAME	SULLIVAN, ARTHUR W.	1.2 NAME	DESMOND, WILLIAM H
STREET ADDRESS	1114 N. DIXIE HWY.	1.3 STREET ADDRESS	1114 N. DIXIE HWY.
CITY - ST - ZIP	LAKE WORTH FL	1.4 CITY - ST - ZIP	LAKE WORTH, FL 33460
TITLE	VD	2.1 TITLE	PD
NAME	TIERNEY, JAMES J	2.2 NAME	TIERNEY, JAMES J.
STREET ADDRESS	1114 N. DIXIE HWY	2.3 STREET ADDRESS	1114 N. DIXIE HWY
CITY - ST - ZIP	LAKE WORTH FL 33460	2.4 CITY - ST - ZIP	LAKE WORTH, FL 33460
TITLE	PD	3.1 TITLE	VD
NAME	NEIL, JOSEPH N	3.2 NAME	BLANVILLE, JOHN R.
STREET ADDRESS	1114 N. DIXIE HWY	3.3 STREET ADDRESS	1114 N. DIXIE HWY
CITY - ST - ZIP	LAKE WORTH FL 33460	3.4 CITY - ST - ZIP	LAKE WORTH, FL 33460
TITLE	TD	4.1 TITLE	
NAME	YURCH, JOHN J	4.2 NAME	
STREET ADDRESS	6968 ATHENA DR	4.3 STREET ADDRESS	
CITY - ST - ZIP	LAKE WORTH FL	4.4 CITY - ST - ZIP	
TITLE	VD	5.1 TITLE	
NAME	PERRAULT, JOSEPH L	5.2 NAME	
STREET ADDRESS	1114 N. DIXIE HWY	5.3 STREET ADDRESS	
CITY - ST - ZIP	LAKE WORTH FL 33460	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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)(k), 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:

John J. Yurch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN J. YURCH

6/16/96 (907) 586-9779
Date Daytime Phone #

CR2E037 (3/96)