

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # F16351 (1)**  
1. Corporation Name  
**TAMARAC CLUB, INC.**



Principal Place of Business Mailing Address  
**7620 MARKET STREET YOUNGSTOWN OH 44513**  
**7620 MARKET STREET YOUNGSTOWN OH 44513 US**

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 24 Country 25 29 Zip 30 Country

3. Date Incorporated or Qualified **01/27/1981** 3a. Date of Last Report **05/01/1995**  
4. FEI Number **34-1326688** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature: Typed or printed name of registered agent (if applicable) (Date: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DEBARTOLO, EDWARD J JR	
STREET ADDRESS	7620 MARKET ST	
CITY-ST-ZIP	YOUNGSTOWN, OH 00000	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	DEBARTOLO, MARIE D	
STREET ADDRESS	7620 MARKET ST	
CITY-ST-ZIP	YOUNGSTOWN, OH 00000	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LIBERATI, ANTHONY W	
STREET ADDRESS	7620 MARKET ST	
CITY-ST-ZIP	YOUNGSTOWN, OH 00000	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	DAVENPORT, LYNN E.	
STREET ADDRESS	7620 MARKET ST	
CITY-ST-ZIP	YOUNGSTOWN, OH 00000	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	WOLFCAL, ARTHUR D JR	
STREET ADDRESS	7620 MARKET STREET	
CITY-ST-ZIP	YOUNGSTOWN OH	
TITLE	AV	<input type="checkbox"/> DELETE
NAME	MURPHY, JAMES F.	
STREET ADDRESS	7620 MARKET ST.	
CITY-ST-ZIP	YOUNGSTOWN OH	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Larry Thrailkill
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James F. Murphy* James F. Murphy 4-28-96 (330) 758-7292  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE TIME PHONE #

CR2E034 (12/95)