

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L21050 (4)**

1. Corporation Name
SILVER SLIPPER CLUB OF PALM BEACH, INC.



Principal Place of Business: **4514 SOUTH DIXIE HWY. WEST PALM BEACH FL 33405**
Mailing Address: **4514 SOUTH DIXIE HWY. WEST PALM BEACH FL 33405**

3. Date Incorporated or Qualified: **10/02/1989**
3a. Date of Last Report: **03/27/1995**
4. FEI Number: **65-0194321**
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
**FORTNER, LLOYD B.
230 ROYAL PALM WAY
PALM BEACH FL 33480**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

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: _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DV	GEER, WILLIAM F.	1433 ARABIAN RD.	LAKE CLARKE SHORES FL	<input type="checkbox"/>
DT	WHITTEN, ROBERT	1006 SOUTH M STREET	LAKE WORTH FL	<input checked="" type="checkbox"/>
DT	GEER, DEBORAH J.	1433 ARABIAN RD.	LAKE CLARKE SHORES FL	<input type="checkbox"/>
DP	GEER, BEVERLY	1410 BETA COURT	LAKE CLARKE SHORES FL	<input type="checkbox"/>
DV	HEAL, DAVID	4468 FLOWS WAY	LAKE WORTH FL	<input checked="" type="checkbox"/>
DS	WHITTEN, BARBARA	1006 SOUTH M STREET	LAKE WORTH FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	Change	Addition
	Mike Kestner	314 North Lakeside Dr.	Lake Worth, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	Change	Addition
	Anne Kestner	314 North Lakeside Dr.	Lake Worth, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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: *Deborah J. Geer* Treasurer 7-30-96 561-659-4371

CR2E034 (3/96)