FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1997 8:00am

Secretary of State

355-6766

Daytime Phone # 0083664

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N28832

(6)

HAMILTON CLUB ASSOCIATION, INC.

| Principal Place | of Business | Mailing Addre | Mailing Address | | | | T LOGITION OLD TIRED LOGIOL ACTION VISION ON MICH. BIRDLA STRIT OLD IT BIRLL OF OUR FIRST. | | | | | | |
|--------------------------|---|---|---|---|--------------------------|------------------|--|----------------|-----------------------------|-------------|------------------|-----------------------|-------------------|
| P.O. BOX 35140 | | | P.O. BOX 35140 | | | | | | | | | | |
| SARASOTA FL 34242 | | | SARASOTA FL 34242-5140 | | | | | | | | | | |
| US | | | US | | | | - | Date Inco | rporated or Qua | alified | 3n Dat | e of Last R | ervort |
| | | | | | | | 3. | 10/ | 2/1988 | annou | Ja. Dat | 07/29/19 | 96" |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | | 4. | 4. FEI Number 65-0347196 | | | , | Ą | plied For | |
| 21 | | 26 | | | | | | | | | | t Applicable | |
| Suite, Apt i | #, etc. | Suite, Apt. #, etc. | | | | 5. | . Certificate | of Status Desi | red | | \$8.75 Fee Re | Additional equired | |
| City & State | 3 | | City & Stat | e | | | 6. | Election C | ampaign Finan | cing | | \$5.00 | May Be |
| 23 | | | 28 | | | | | Trust Fund | d Contribution | | | Added | |
| Zip 24 | 25 Cou | ntry | Zip 29 | 3 | Country | 1 | 8. | This corpo | oration has liabi atutes | | angible t Yes | | . 199.032, |
| 44 | 9. Name and Add | iress of Current | 1 | | <u> </u> | | 10. | | d Address of N | | | | |
| | | | | · | 81 | Name | | | | | | | |
| SPRAGI | NS, R. WENDELL | | | | 82 | Ctroot | Address / | D O Day No | umber is Not Ad | | | | |
| 3982 HAMILTON CLUB CR | | | | | | Sheery | Hodiess (r | F.O. BOX IN | omber is Not Ac | sceptable. | , | | |
| | TA FL 34242 | | | 83 | - | | | | | | | | |
| 0, 10,00 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | - | - | | | | | | las I Zia | Code |
| | | | | | 84 | City | | | | | FL | 85 Zip | C006 |
| 11. Pursuant t | to the provisions of S egistered agent, or b | ections 617.0502 | and 617.1508, Fk | orida Statutes | , the abov | e-named | corporatio | on submits | this statement f | or the pur | pose of | changing it | s registered |
| office or re | egistered agent, or b m familiar with, and a | oth, in the State o | f Florida. Such ch ons of Section 6: | iange was aut 17.0503. Florid | thorized b da Statute | y the corp s. | poration's I | board of di | rectors. I hereb | y accept t | the appo | intment as | registered |
| SIGNATURE | | ,- | | , | | | | | | | | | |
| SIGNATURE _ | Signature, typed or printed n | ame of registered agent | and title if applicable | (NOTE: F | Registered Ag | ent signature | | | | | DATE | | |
| 12. | | OFFICERS AND | | | 13. | | | ADDITION: | S/CHANGES TO | OFFICE | RS AND | | |
| TITLE | PSD | | L | DELETE | 1.1 TITLE | | | | - | | ' | Change | Addition |
| NAME | CUNNINGHAM, | | | | 1.2 NAME | | | | | | | | |
| STREET ADDRESS | 3901 HAMILTO | | | | 1.3 STREE | T ADDRESS | | | | | | | |
| Cłty-St-ZiP | SARASOTA FL | 34242 | 7 | | 1.4 CITY- | ST-ZIP | , <u></u> | | | | | | 1 1 1 1 1 1 1 1 1 |
| TITLE | VID | | Ц | DELETE | 2.1 TITLE | | | | | | , | Change | Addition |
| NAME | SPRAGINS, R. | | . | | 2.2 NAME | | | | | | | | |
| STREET ADDRESS | 3982 HAMILTO | | E | | | T ADDRESS | | | | | | | |
| CITY - ST - ZIP | SARASOTA FL | 34242 | | Driete | 2. 4 CiTY- | ST-ZIP | | | | 7 | F2* 11 - 1 | Channa | Addition |
| TITLE | VTD | n | L | DELETE | 3.1 TITLE | | | | | | | Change | Addition |
| NAME | KALIN, EDWAR | | | | 3 2 NAME | | | | | | | | |
| STREET ADDRESS | 5252 S. TAMIA SARASOTA FL | | | | 1 | T ADDRESS | | | | | | | |
| CITY-ST-ZIP | SANASUIA FL | 34231 | - П | DELETE | 3.4. CITY - 4.1 TITLE | SI - ZIP | | | | | | Change | Addition |
| TITLE | | | لسا | DELETE | 4.1 THEE | | | | | | | C Orlange | Last Abbuilder |
| NAME OXOTET ADDRESS | | | | | | T ADDRESS | | | | | | | |
| STREET ADDRESS | | | | | 4.3 STREE | | | | | | | | |
| CITY - ST - ZIP TITLE | | | П | DELETE | 5.1 TITLE | 31-24 | <u></u> | | | | | Change | Addition |
| NAME | | | | | 5.2 NAME | | | | | | | | |
| STREET ADDRESS | | | | | i i | T ADDRESS | | | | | | | |
| CITY - ST - ZIP | | | | | 5.4 CITY- | | | | | | | | |
| TITLE | | | | DELETE | 6.1 TITLE | 51-£IF | | | | | | Change | ☐ Addition |
| NAME | | | | | 6.2 NAME | | | | | | , | • | |
| STREET ADDRESS | | | | | | T ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | | | 6.4 CITY- | | | | | | | | |
| 14 I do heret | by certify that the info | rmation supplied | with this filing doc | es not qualify | for the ex- | amption s | tated in Se | ection 119. | 07(3)(i), Florida | Statutes. | 1 further | certify that | the |
| informatio | n indicated on this a flicer or director of th | nnual report or su e corporation or ti | pplemental annua he receiver or trus | al report is true stee empower | e and acc | urate and | that my s | sionature sh | all have the sai | me legal e | effect as | if made un | der oath: that |
| appears i | n Block 12 or Block 1 | 13 if changed, or o | on an attackment | with an addre | 988. | | | | | 941 | • | | |