FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

N94000003935 (3)

MIAMI BEACH ROD & REEL CLUB, INC.

Principal Place of Business Mailing Address				E ISONITE DIO ISINI SADRI SUNI DENIN BONN SOND CINID ISINO NINO SAN SON	
208 S HIBISCUS DR 208 S HIBISCUS DR MIAMI BEACH FL 33139-5132			39-5132		
					3. Date Incorporated or Qualified
2. Principal Place of Business 2a. Mailing Address			•		4. FEI Number Applied For 59-0358540 Not Applied be
		26			\$0.75 additional
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Regulred
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zıp	Country	Zip	 	untry	8. This corporation has liability for intangible tax under s. 199.032,
24	25 9. Name and Address of Currel	29	30	T	Florida Statutes Yes No 10. Name and Address of New Registered Agent
	g. Hanne and Address of Conte	It hegistered Agent		81 Name	
MURRAY	/ JAMES P			B2 Stree	set Address (P.O. Box Number is Not Acceptable)
MURRAY, JAMES P 14505 SW 84TH CT.				bz Stree	get Address (F.O. Box Number is Not Acceptable)
MIAMI F	L 33158			63	•
				84 City	, B5 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida	Statutes, the a	bove-name	ned corporation submits this statement for the purpose of changing its registered
office or r agent. La	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change pations of, Section 617.05	was authorize 03, Florida Sta	id by the co tutes.	corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered ag		(NOTE: Registers	d Agent signatu	ature required when reinstating). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICERS AN	ID DIRECTORS Page Page		iti F	D Change Addition
NAME	TYSON, PETER R			IAME	PIAZZA, ALBERT
STREET ADDRESS	P O BOX 4281 N/A			TREET ADDRESS	SS 941 MANTANZAS
CITY-ST-ZIP	VERO BEACH FL		1.40	CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	PD	☐ DELE	E 2.1 F	ITLE	D Change Addition
NAME	REHBERG, WARNER K		22 N	IAME	REEDER, LAWRENCE M
STREET ADDRESS	2221 NW 87TH TERRACE			TREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL	☐ DELE		CITY-ST-ZIP	MIAMI, FL 33156
THILE	DV			inle AME	Light Straight Light Straight
NAME STREET ADDRESS	TUNSTALL, STEPHEN E 7745 SW 114TH STREET			famic Treet address	ess
CITY-ST-ZIP	MIAMI F			CITY-ST-ZIP	
TITLE	D	DELE DELE			D Change Addition
NAME	MURPHY, JIMMY W		4.21	NAME	WRUBLE, LIOYD,
STREET ADDRESS	2138 NE 122ND RD		43 \$	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33181			CITY-ST-ZIP	MIAMI, FL # 33157
TITLE	D arrange areas	☐ DEFE.			PD K Change Addition
NAME	PEARSON, GEOFFREY			AME	
STREET ADDRESS	PO BOX 2022 N A			STREET ADORES: Dity-St-Zip	ESS /
CITY - ST - ZIP	S. MIAMI FL 33243 STD	☐ DELE		IITLE	, Change Addition
NAME	SCHULTZ, ROGER A	<u> </u>		NAME	
STREET ADDRESS	131 N. HIBISCUS DR.		· ·	STREET ADDRESS	ESS
CITY - ST - ZIP	MIAMI BCH FL 33139		6.4 0	CITY-ST-ZIP	
14. I do here	by certify that the information supplied indicated on this appual report of	cunnismental annual ren-	ort is true and	accurate at	on stated in Section 119.07(3)(i), Florida Statutes. I further certify that the and that my signature shall have the same legal effect as if made under oath; that
l laman o	officer or director of the corporation o	or the receiver or trustee e	mpowered to	execute this	his 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:

MATURE AND TO SEE OF PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

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FILED

May 12 1997 8:00am

Secretary of State

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