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

DOCUMENT # N95000000490 (1)

1. Corporation Name
ALANO BEACH CLUB, INC.

Principal Place of Business	Mailing Address
1100 PINELLAS BAYWAY #G-3 ST. PETERSBURG FL 33715-2102	1100 PINELLAS BAYWAY #G-3 ST. PETERSBURG FL 33715-2102

3. Date Incorporated or Qualified: 01/27/1995
3a. Date of Last Report: 1/27/95

2. Principal Place of Business
21 4615 Gulf Blvd.
22 Suite 112
23 St. Pete Beach Fl.
24 Zip 33736
25 Country Pinellas

2a. Mailing Address
26 P.O. Box 66793
27 Suite, Apt. #, etc.
28 City & State St. Pete Beach, Fl.
29 Zip 33736-6793
30 Country Pinellas

4. FEI Number 59-3240397 ☐ 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

KELDERHOUSE, THOMAS D
1100 PINELLAS BAYWAY
#G-3
ST. PETERSBURG FL 33715-2102

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 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOLLISTER, DAVID D 357 41ST AVE. ST. PETERSBURG FL 33706	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUSSEY, RUTLAND W 1060 WATER OAK CT. N.E. ST. PETERSBURG FL 33703-3135	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLS, PHILLIP 6340 BURLINGTON AVE. NORTH ST. PETERSBURG FL 33710	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KELDERHOUSE, THOMAS D 1100 PINELLAS BAYWAY, #G3 ST. PETERSBURG FL 33715-2102	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TURNER, ARTHUR 2808 PASS-A-GRILLE WAY ST. PETERSBURG FL 33706	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D-Chairman David D. Hollister 357-41st Ave. St. Pete Beach, FL 33706	☒ Change ☐ Addition
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D-VP Janet L. Harris 550-72nd Ave. St. Pete Beach, Fl. 33706	☐ Change ☒ Addition
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	D Charles Mason 211-58th Ave. St Pete Beach, Fl. 33706	☐ Change ☒ Addition
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	D-Sec Diana Smiles 6291-Bahia Del Mar Cir #107 St. Petersburg, Fl. 33715	☒ Change ☐ Addition
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	D-Treas. Thomas D. Kelderhouse 1100 Pinellas Bayway G-3 St. Petersburg, Fl. 33715-2102	☐ Change ☐ Addition
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (3/96)

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: Thomas D. Kelderhouse 6/16/96 813-864-0411
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0012657