

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N39560 (0)

1. Corporation Name

LAKE BUTLER SINGLES CLUB, INC.

APPROVED
AND
FILED

95 MAY -1 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

N.W. 3RD AVE.
LAKE BUTLER FL 32054
US

RT. 1, BOX 640
LAKE BUTLER FL 32054
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/16/1990

3a. Date of Last Report

03/03/1994

4. FEI Number

59-3019031

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 PO Box 474

23 City & State

27 City & State

24 Zip

25 County

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9. Name and Address of Current Registered Agent

MERRITT, LORETTA
RT. 1, BOX 640 N/A
HIGHWAY 100E
LAKE BUTLER FL 32054

10. Name and Address of New Registered Agent

81 Name Janie Godwin
82 Street Address (P.O. Box Number is Not Acceptable)
Rt 2 Box 260 A1
83
84 City Lake Butler FL 85 Zip Code 32054

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 Janie A. Godwin

Co-President

4/28/95

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	MERRITT, LORETTA
STREET ADDRESS	RT. 1, BOX 640, HWY. 100E N/A
CITY ST ZIP	LAKE BUTLER FL
TITLE	DT
NAME	TYRE, DOROTHY
STREET ADDRESS	941 ARREDONDO
CITY ST ZIP	LAKE CITY FL
TITLE	DV
NAME	SEAY, PEARL
STREET ADDRESS	P. O. BOX 130, PART ST. S. N/A
CITY ST ZIP	WORTHINGTON SPGS. FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D/P	☒ Change ☐ Addition
12 NAME	Lloyd Sapp	
13 STREET ADDRESS	P.O. Box 243 N/A	
14 CITY ST ZIP	Newberry, FL 32669	
21 TITLE	D/P	☒ Change ☐ Addition
22 NAME	Janie Godwin	
23 STREET ADDRESS	Rt 2 Box 260 A1	
24 CITY ST ZIP	Lake Butler, FL 32054	
31 TITLE	D/P	☒ Change ☐ Addition
32 NAME	Adelene Williams	
33 STREET ADDRESS	2411 McFarlane Av	
34 CITY ST ZIP	Lake City, FL 32025	
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		☐ Change ☐ 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Janie A. Godwin

4/28/95

904 496 1188