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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 18 1997 8:00am

Secretary of State

Phone # 0045731

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

THE TOURIST CLUB OF ZEPHYRHILLS, INC.

ZEPHYRHILLS FL 33541

CITY-ST-ZIP

SIGNATURE:

Principal Place of Business Mailing Address 5216 SEVENTH STREET 5216 SEVENTH STREET ZEPHYRHILLS FL 33540 ZEPHYRHILLS FL 33540-5049 Date Incorporated or Qualified 02/07/1977 3a. Date of Last Report 06/12/1996 2. Principal Place of Business 2a. Mailing Address Applied For 59-1749373 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zφ Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Pres. Street Address (P.O. Box Number is Not Acceptable) PHYLLIS J. HICKS 37425 DERBYSHIRE DR. MIRIAM ZEPHYRHILLIS FL 33525 Zip Code 33641 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. of registered agent and little it spolicable. SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE Change Addition 1.1 TITLE THILE Joseph T. Gagne PHYLLIS J. HICKS NAME 1.2 NAME 37425 DERBYSHIRE DR. 1.3 STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33541 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE TITLE DICK JEWETT 2.2 NAME NAME 38422 COTTONWOOD PLACE STREET ADDRESS 2.3 STREET ADDRESS ZEPHYRHILLS FL 33540 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE CHARTES WATKER PAUL PEGAN 3.2 NAME NAME 6035 117h 6717 HOLLY CT. 3.3 STREET ADDRESS STREET ADDRESS 335YO ZEPHYRHILLS FL 33540 ZephyRH,16 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE FRED Falk NAME PETE ROMANO 4. 2 NAME 38730 MADRIS AVE 7105 EL MATORDOR 4.3 STREET ADDRESS STREET ADDRESS Zephyn Hills, Fla 33541 ZEPHYRHILLS FL 33541 4.4 CITY-ST-ZIP DITY-ST-ZIP X DELETE Change Addition 5.1 TITLE TITLE CTYDE HATEH RON THOMPSON 5.2 NAME NAME 39033 MANOR DR. 4726 DOVE DR. STREET ADDRESS 5.3 STREET ADDRESS 33540 ZEPHYRHILLS FL 33541 CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE TAYLOR, HESTER 62 NAME NAME 37531 BINGO BLVD STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED