


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **701431** (9)

1. Corporation Name

MYRTLE GROVE COMMUNITY CLUB INC



Principal Place of Business DEAD END OF 61ST SOUTH OF WESTJACKSON P O BOX 3202 PENSACOLA FL 32516	Mailing Address DEAD END OF 61ST SOUTH OF WESTJACKSON P O BOX 3202 PENSACOLA FL 32516
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3. Date Incorporated or Qualified 09/16/1960
4. FEI Number 27-0007606
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent CURRIE, GLENN 7820 TEMPLETON ROAD PENSACOLA FL 32506	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
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KIRKLAND, CHARLES 15 NOTTINGHAM WAY PENSACOLA, FL 00000	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D Kirkland, Charles 15 NOTTINGHAM WAY PENSACOLA, FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KIRKLAND, MIKE 21 GAMWELL ROAD PENSACOLA FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D Kirkland, Mike 21 GAMWELL ROAD PENSACOLA, FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLAGHER, JEFF 10 OSAGE TRAIL PENSACOLA, FL 00000	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D BILLY, JOHN P. 10887 SILVERCREEK DR. PENSACOLA, FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BENDER, JOHN M. 7762 TEMPLETON ROAD PENSACOLA FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D CURRIE, GLENN 7820 TEMPLETON RD. PENSACOLA, FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CURRIE, GLENN 7820 TEMPLETON RD. PENSACOLA FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D THOMAS, WALTER M. 322 N. 61ST AVE. PENSACOLA, FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, WALTER M. 322 N. 61ST AVE. PENSACOLA FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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: *[Signature]* 3/23/98 850-857-4548

CR2E037 (10/97)