FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

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DOCUMENT # 703217 (0)

1. Corporation Name

CALOOSA CRUISE CLUB INC

Principal Place of Business	Mailing Address
C/O CHARLES N. SCHWARZ 5066 SORRENTO CT. CAPE CORAL FL 33904	C/O CHARLES N. SCHWARZ 5066 SORRENTO CT. CAPE CORAL FL 33904

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/18/1961
3a. Date of Last Report: 01/24/1994
4. FEI Number: NOT APPLICABLE — ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

SCHWARZ, CHARLES N.
5066 SORRENTO COURT
CAPE CORAL FL 33904

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City — FL — 35 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VCD	1.1 TITLE	SEC-D ☐ Change ☒ Addition
NAME	KEARNS, JAMES	1.2 NAME	ARDELLE SCHOBER
STREET ADDRESS	4937 S.W. 11TH PLACE	1.3 STREET ADDRESS	3935 Country Club Blvd.
CITY-ST-ZIP	CAPE CORAL FL	1.4 CITY-ST-ZIP	Cape Coral, Fl. 33904
TITLE	D COMM.	2.1 TITLE	Treas - D ☐ Change ☒ Addition
NAME	BENNETT, LORRAINE	2.2 NAME	Lois Price
STREET ADDRESS	4906 SW 5TH PLACE	2.3 STREET ADDRESS	408 S.W. 53rd Terrace
CITY-ST-ZIP	CAPE CORAL FL	2.4 CITY-ST-ZIP	Cape Coral, Fla. 33914
TITLE	~~S~~ D Rear Com.	3.1 TITLE	Fleet Capt. - D ☐ Change ☒ Addition
NAME	~~SILVERS, BETTY~~ Don Sillvers	3.2 NAME	Robert Dauphim 33904
STREET ADDRESS	131 BROOKSIDE STREET	3.3 STREET ADDRESS	4219 First Ave. Cape Coral Fla
CITY-ST-ZIP	LEHIGH ACRES FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	Reav. Off. - D ☐ Change ☒ Addition
NAME	KOLLMAR, ~~EDGAR~~ DOROTHY	4.2 NAME	James Newkirk
STREET ADDRESS	5026 S.W. 12TH PLACE	4.3 STREET ADDRESS	161 S.W. 51st Street
CITY-ST-ZIP	CAPE CORAL FL	4.4 CITY-ST-ZIP	Cape Coral, Fla. 33914
TITLE	D	5.1 TITLE	D ☐ Change ☒ Addition
NAME	SCHWARZ, CHARLES N.	5.2 NAME	James Hawkins
STREET ADDRESS	5066 SORRENTO CT.	5.3 STREET ADDRESS	2727 S. E. 24th Place
CITY-ST-ZIP	CAPE CORAL FL	5.4 CITY-ST-ZIP	Cape Coral, Fla. 33904
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	SCHOBER, NORMAN	6.2 NAME	
STREET ADDRESS	3935 COUNTRY CLUB BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	6.4 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)(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: Charles N. Schwarz Charles N. Schwarz — Mar. 6, 1995 — 813 542 2848
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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