FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 28 1997 8:00am

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

1997 DOCUMENT #

704063

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i, corporation	II IAMIIIA	` ,			
LAKE WALES TOURIST CLUB INC				1 (0 B))) (2 BB)(88 (6) 2(B)) A B)) B B)(B)	ERRE BIBSE BIBSE BEBSE BIBSE BIBSE BIBSE 19 BE
Principal Place	e of Business	Mailing Address		I JEDINI IDDIN GAJAF ESDIA EDIND DINDD	lift binin minin afnti etnin ninit afnti fêbt
205 - 5TH ST., LAKE WALES F		14 CANSON AVE BABSON PARK FL 33827-972	22		,
08				3. Date Incorporated or Qualified	3a. Date of Last Report
		*		05/18/1962	02/07/1996
	face of Business	2a. Mailing Address		4. FEI Number 59-1005846	Applied For
21 Suite, Apt.	# ato	Suite, Apt. #, etc.		39 1003040	Not Applicable \$8.75 Additional
22	", 6,0.	27		5. Certificate of Status Desired	Fee Required
City & State City & St		City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it	ntangible tax under s. 199.032,
24	25	29 3	0		Yes No
<u></u>	9. Name and Address of Curren	t Registered Agent	04 Name	10. Name and Address of New Reg	gistered Agent
81 Name C1				URTIS Vernor)
MCGUIRE, WILIAM A			82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)
14 CARSON AVE.				00 HWY Z7 NORTH	Lot 326
- BABSON	N PARK FL 33827		LAK	E WALES FL	33853
			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.					
	art farminar with and accept the conga	AID 15 01, 360 (ID11 017.0303, 1101)	ua Gialoles.		4-10-97
SIGNATURE .	Signature, typed or printed name of registried age	nt and title if applicable (NOTE I	Registered Agent argnature requi	ired when reinstaling)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME CURTIS, VERNON		1,2 NAME			
STREET ADORESS	2700 HWY 27 NORTH, LOT 3	26	1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WALES FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
TITLE	V MACCINET MINISTER		2.2 NAME		Change Moniton
NAME STREET ADDRESS	MCGUIRE, WILLIAM A 14 CARSON AVE		2.2 NAME 2.3 STHEET ADDRESS		
CITY-ST-ZIP	BABSON PARK FL		2 4 CITY-ST-ZIP		
TITLE	D	DELETE	31 TITLE		Change Addition
NAME	WILSON, JIM	—	3.2 NAME		-
STREET ADDRESS	312 RIDGE MANOR DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WALES FL		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	41 TITLE		Change
NAME	ANDERSON, CLIFFORD		4. 2 NAME		
STREET ADDRESS	343 0 HWY 27 SOUTH, LOT 3	13	4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WALES FL	<u> </u>	4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SPEAR, JOSEPH		5.2 NAME		
STREET ADDRESS	130 WEST ORANGE AVENUE	, I	5.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WALES FL	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
TITLE NAME	ST DEVOICE BETTY		6.2 NAME		E surado E vacados
STREET ADDRESS	DEVRIES, BETTY 3430 HWY 27 SOUTH, LOT 3	lQ.	6.3 STREET ADDRESS		
CITY-ST-ZIP	I AKE WAIES EI	N.	6.3 STREET ADDRESS		

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.