

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
----------------------------------------------------------	-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

DOCUMENT # **704191** (6)

1. Corporation Name

SENIOR CITIZENS CLUB LANTANA, FLORIDA, INC.

Principal Place of Business

Mailing Address

IRIS AND DIXIE
BOX 3303
LANTANA FL 33465-3303

IRIS AND DIXIE
BOX 3303
LANTANA FL 33465-3303



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/19/1962	3a. Date of Last Report 06/18/1996
21		26		4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GEORGE L. ARMSTRONG
1300 S. BROADWAY #29
LANTANA FL 33462

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P XX DELETE	1.1 TITLE	P XX Change <input type="checkbox"/> Addition
NAME	HAND, JANE A	1.2 NAME	GEORGE L. ARMSTRONG
STREET ADDRESS	1300 S. BROADWAY #29	1.3 STREET ADDRESS	1300 S. BROADWAY #29
CITY-ST-ZIP	LANTANA FL	1.4 CITY-ST-ZIP	LANTANA, FL. 33462
TITLE	V XX DELETE	2.1 TITLE	V XX Change <input type="checkbox"/> Addition
NAME	NOWICKI, EVENLYN	2.2 NAME	PATRICIA A. ARMSTRONG
STREET ADDRESS	1412 LAKEVIEW DR.	2.3 STREET ADDRESS	1300 S. BROADWAY #29
CITY-ST-ZIP	LAKE WORTH FL	2.4 CITY-ST-ZIP	LANTANA, FL. 33462
TITLE	RS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINDSTROM, BARBARA	3.2 NAME	
STREET ADDRESS	703 N 4TH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	LANTANA FL	3.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LARSEN, JEAN	4.2 NAME	
STREET ADDRESS	3310 PARK LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D XX DELETE	5.1 TITLE	D XX Change <input type="checkbox"/> Addition
NAME	GORDON, DOROTHY	5.2 NAME	EDWARD TUMINSKI
STREET ADDRESS	3100 SPRINGDALE BLVD	5.3 STREET ADDRESS	3721 BROOKLYN LN.
CITY-ST-ZIP	LAKE WORTH FL	5.4 CITY-ST-ZIP	LAKE WORTH, FL. 33461
TITLE	D XX DELETE	6.1 TITLE	D XX Change <input type="checkbox"/> Addition
NAME	ARMSTRONG, PATRICIA	6.2 NAME	EDWIN PELKONEN
STREET ADDRESS	1300 S. BROADWAY #29	6.3 STREET ADDRESS	420 N. 5th. ST.
CITY-ST-ZIP	LANTANA FL	6.4 CITY-ST-ZIP	LANTANA, FL. 33462

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:

GEORGE L. ARMSTRONG

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/97

(561) 586-5148

XXXXXX

Daytime Phone # 0043933

CR2E037 (9/96)