


FILE NOW: FILING FEE IS \$61.25

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Feb 22, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 704191					
1. Corporation Name SENIOR CITIZENS CLUB LANTANA, FLORIDA, INC.					
Principal Place of Business IRIS AND DIXIE BOX 3303 LANTANA FL 33465-3303			Mailing Address IRIS AND DIXIE BOX 3303 LANTANA FL 33465-3303		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		06/19/1962	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		NOT APPLICABLE	
24 Country		29 Country		5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SAARI EVELYN D 1300 S BROADWAY #24 LANTANA FL 33462				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83 City			
				84 Zip Code			
				ROBERT D. HAND 896 N. FEDERAL HWY LANTANA, FL 33462			

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: Robert D. Hand DATE: 1-6-99

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	ARMSTRONG, GEORGE L.	1.2 NAME	HAND, JANE
STREET ADDRESS	1300 S. BROADWAY #29	1.3 STREET ADDRESS	896 N. FEDERAL HWY #432
CITY-ST-ZIP	LANTANA FL	1.4 CITY-ST-ZIP	LANTANA, FL 33462
TITLE	V	2.1 TITLE	V
NAME	ARMSTRONG, PATRICIA A.	2.2 NAME	TERRY ANTONETTE
STREET ADDRESS	1300 S BROADWAY #29	2.3 STREET ADDRESS	229 W. K ST
CITY-ST-ZIP	LANTANA FL	2.4 CITY-ST-ZIP	LAKE WORTH, FL
TITLE	RS	3.1 TITLE	
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	4.1 TITLE	
NAME	LARSEN, JEAN	4.2 NAME	KRUPILIS, JOHN
STREET ADDRESS	3310 PARK LANE	4.3 STREET ADDRESS	6873 VENETIAN DR
CITY-ST-ZIP	BOYNTON BEACH FL	4.4 CITY-ST-ZIP	LANTANA, FL
TITLE	D	5.1 TITLE	
NAME	TUMINSKI, EDWARD	5.2 NAME	
STREET ADDRESS	3721 BROOKLYN LN.	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	ORJALA JOHN	6.2 NAME	
STREET ADDRESS	823 S LAKE DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	LANTANA FL 33462	6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: JANIS MATHIAS DATE: 1-6-99 DAYTIME PHONE: 561-588-9302

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

CR2E037 (11/98)