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NONPROFIT CORPORATION ANNUAL REPORT

1997



SIGNATURE: STEWART A. BIERBOLENLIFTIUM

FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 705137

(8)

WYOMING ANTELOPE CLUB, FLORIDA CHAPTER, INC.

Principal Place of Business Mailing Address					# 1001/14 1004 DB101 0140 H140 H1000 H1141 I	#1 01011 31011 01810 01011 0101	H BURNI HEBI
3700 126TH AVE N PO BOX 724 PINELLAS PK FL 34664		P.O. BOX 22352 ST PETERSBURG FL 33742-2352 US					
					3. Date Incorporated or Qualified 01/31/1963	3a. Date of Last Re 04/17/1990	port 3
2. Principal Pl	ace of Business	2a.	Mailing Address		4. FEI Number	Apr	olied For
21 Cuito Apt	# A&A	26	Cuito Ant II ata		59-2506422		Applicable
Suite, Apt	#, @tc.	27	Sulte, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 A	
City & State)		City & State		6. Election Campaign Financing	\$5.00 A	Mav Be
23		28		<u>.</u>	Trust Fund Contribution	Added to	
Zip	Country		Zip	Country	8. This corporation has liability for i		199.032,
24	25] 9. Name and Address of Currer	29 t Registe	ered Agent	30	Florida Statutes 10. Name and Address of New Re	Yes No	
				81 Name		A	
MOBERLI	EY, JAMES O			82 Street	Address (P.O. Box Number's Not Accepted	la)	
425 33RD AVE NORTH					Address (P.O. Box Number is Not Acceptab	E	
ST.PETERSBURG FL 33704							
				84 City	- D	85 Zip C	ode a
11 Durauant t	to the provisions of Sections 617 050	2 and 61	7 1509 Florida State	tos the shows named	TETEPSPIRA	FL 193	70.3
office or re	egistered agent, or both, in the State	of Florida	a. Such change was	authorized by the corp	corporation submits this statement for the population's board of directors. I hereby accept	arpose of changing its it the appointment as r	egistered
	m familiar with, and accept the oblig	ations of,	Section 617.0503, F	-iorida Statutes.	4	-10-97	
SIGNATURE _	Signal e, typed or printed name of registered de-	nt and title if	applicable (NC	OTE: Registered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AN	DIRECT		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS	IN 12
TITLE	V		☐ DELETE	1.1 TITLE		Change	Addition
NAME	KATE HUMMEL			1.2 NAME			
STREET ADDRESS	13891 87TH AVENUE, NORTH			1.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL SD		DELETE	1.4 CITY - ST - ZIP		Change	Addition
TITLE	DIPPLE, FRANK B.		D DECEME	2.1 THILE		L Change	Addition
NAME STREET ADDRESS	7070 60TH STREET N			2.2 NAME 2.3 STREET ADDRESS			
CHY-SI-ZIP	PINELLAS PARK FL			2.4 CITY-ST-ZIP			,
TITLE	T		DELETE	3.1 TITLE		☐ Change	Addition
NAME	BIERBOWER, STEWART A.			3.2 NAME			
STREET ADDRESS	1500 81ST AVENUE N			3.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL			3.4. CITY-SY-ZIP	.		
TITLE	P		DELETE	4.1 TITLE	PRESIDENO_	☐ Change	Addition
NAME	HAYWORTH, CHUCK			4. 2 NAME	1911 66 ST 10		
STREET ADDRESS	1320 50TH AVENUE NE			4.3 STREET ADDRESS	11911 60	•	
CITY-ST-ZIP	ST. PETERSBURG FL		200	4.4 CITY - ST - ZIP	Longo, 82 34643		T 1
TITLE	D LANE WOODY		☐ DELETE	5.1 TITLE		Change	Addition
NAME	LANE, WOODY 2610 61 SO AVENUE			5.2 NAME			
STREET ADDRESS	ST. PETERSBURG FL			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	D D		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	VICE-PRESIDENT	Change	Addition
NAME	WEBBER, CHARLES E.		73	6.2 NAME	navin Todden		
STREET ADDRESS	1500 BAYSHORE BLVD			6.3 STREET ADDRESS	7350 JULIST NI	Ē	
CITY-ST-ZIP	INDIAN ROCKS BEACH FL			6.4 CITY - ST - ZIP	DAVID TO den 7850 1461 ST. Pute, fc 3.	3702	
14. I do hereb	by certify that the information supplie	d with this	s filing does not qua	lify for the exemption s	tated in Section 119.07(3)(i), Florida Statute:	s. I further certify that th	10
I am an of	ficer or director of the corporation or	the recei	iver or trustee empo	wered to execute this r	that my signature shall have the same lega report as required by Chapter 617, Florida S	i eirect as if made unde tatutes; and that my ne	ər oatn; that ı me
appears ir	n Block 12 or Block 13 if changed, o	on an at	tachment with an ac	idress ^		•	