FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **707453** **(7)**

1. Corporation Name

LANARK VILLAGE BOAT CLUB INC

Principal Place of Business	Mailing Address
HIGHWAY 98 P.O. BOX 504 LANARK VILLAGE FL 32323	HIGHWAY 98 P.O. BOX 504 LANARK VILLAGE FL 32323

3. Date Incorporated or Qualified: **06/17/1964**
3a. Date of Last Report: **06/14/1995**

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: **59-1309253** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LANE ROBERT L
HWY 98
P O BOX 777
EASTPOINT FL 32328

10. Name and Address of New Registered Agent

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 _____ 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	CD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	DOWLING, BERNARD		1.2 NAME	
STREET ADDRESS	MARIGOLD ST		1.3 STREET ADDRESS	
CITY-ST-ZIP	LANARK VILLAGE FL		1.4 CITY-ST-ZIP	
TITLE	VC	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GARRISON, JACK		2.2 NAME	
STREET ADDRESS	MELODY ST		2.3 STREET ADDRESS	
CITY-ST-ZIP	LANARK VILLAGE FL		2.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	LUPI, LOUIS		3.2 NAME	
STREET ADDRESS	CARLTON ST.		3.3 STREET ADDRESS	
CITY-ST-ZIP	LANARK VILLAGE FL		3.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	HARRIS, ANN		4.2 NAME	
STREET ADDRESS	PINE ST.		4.3 STREET ADDRESS	
CITY-ST-ZIP	LANARK VILLAGE FL		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	STOWE, IVAN		5.2 NAME	
STREET ADDRESS	CARLTON ST.		5.3 STREET ADDRESS	
CITY-ST-ZIP	LANARK VILLAGE FL		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	WEBER, MAGGIE		6.2 NAME	
STREET ADDRESS	CARLTON ST		6.3 STREET ADDRESS	
CITY-ST-ZIP	LANARK VILLAGE FL		6.4 CITY-ST-ZIP	

CR2E037 (12/95)

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)(k), 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: LOUIS LUPI Louis Lupi Jr. Feb 6, 1996 697-2018
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #