

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 707620

(1)

1. Corporation Name

PALM BEACH COUNTY SHELL CLUB, INC.

Principal Place of Business

Mailing Address

C/O PHYLLIS DIEGEL
2000 N CONGRESS AVENUE, 223
WEST PALM BEACH FL 33409
US

C/O PHYLLIS DIEGEL
2000 N CONGRESS AVENUE, 223
WEST PALM BEACH FL 33409
US

3. Date Incorporated or Qualified

07/21/1964

4. FEI Number

59-6136281

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners' association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIEGEL, PHYLLIS
2000 N. CONGRESS AVENUE
#223
WEST PALM BEACH FL 33409

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

TITLE D ☒ DELETE

NAME HAGAR, TOM
STREET ADDRESS 808 5TH AVE., N.
CITY-ST-ZIP LAKE WORTH FL

TITLE P ☐ DELETE

NAME DIEGEL, PHYLLIS
STREET ADDRESS 2000 NORTH CONGRESS AVENUE, #223
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE D ☐ DELETE

NAME ROOT, JOHN
STREET ADDRESS 503 ROSELAND DRIVE
CITY-ST-ZIP WEST PALM BEACH FL 33402

TITLE T ☐ DELETE

NAME DIEGEL, DEBBIE
STREET ADDRESS 2000 NORTH CONGRESS AVENUE, #223
CITY-ST-ZIP WEST PALM BEACH FL 33402

TITLE S ☐ DELETE

NAME SPOZARSKY, LYNNE
STREET ADDRESS 4641 PALLADIN STREET #36-S
CITY-ST-ZIP WEST PALM BEACH FL 33417

TITLE D ☐ DELETE

NAME MARSHALL, CAROLE
STREET ADDRESS 932 COCHRAN DR
CITY-ST-ZIP LAKE WORTH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME LANGHAM, MARK
1.3 STREET ADDRESS 1210 GENERAL PUNTE TR
1.4 CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME MARSHALL, CAROLE
2.3 STREET ADDRESS 932 COCHRAN DR
2.4 CITY-ST-ZIP LAKE WORTH, FL 33461

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME ROOT, JOHN
3.3 STREET ADDRESS 503 Roseland Dr.
3.4 CITY-ST-ZIP W PALM BEACH, FL 33402

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME SPOZARSKY, GEORGE
4.3 STREET ADDRESS 4641 Palladin #36-S
4.4 CITY-ST-ZIP West Palm Beach, FL 33417-8097

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME SPOZARSKY, LYNNE
5.3 STREET ADDRESS 4641 PALLADIN #36-S
5.4 CITY-ST-ZIP W.P.B., FL 33417

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME DIEGEL, PHYLLIS
6.3 STREET ADDRESS 2000 N CONGRESS AVE, #223
6.4 CITY-ST-ZIP W. Palm Beach, FL 33409

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.

SIGNATURE:

George Spozarsky, Treas.

8/20/98

561-683-0513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)