FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997DOCUMENT #

710203

(1)

LAKELAND SHRINE CLUB HOLDING CORPORATION, INC.					
LANCL	AND SHRING GLOD HOLDIN	G CONFORMION, INC	<i>,</i>		
Principal Place	e of Business	Mailing Address		T HORIST SEADS HALL EDING HER BEIND I	ANG DEDAY MEDIL DEDAY BEDER DEDAY DEDAY APDR
125 W BRANNEN ROAD POST OFFICE BOX #5244 LAKELAND FL 33813 2706 LAKELAND FL 33807-5244 US US					
···				3. Date Incorporated or Qualified 01/17/1966	3a. Date of Last Report 04/01/1996
		2a. Mailing Address		4. FEI Number 23-708 1982	Applied For
		Suite, Apt. #, etc.		20 100 1002	Not Applicable
22		<u> </u>		5. Certificate of Status Desired	S8.75 Additional Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25		30		Yes X No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	Jistered Agent
				HARD M. DECK	<u></u>
ESHBACH, ALTON R.			82 Street Addr	ress (P.O. Box Number is Not Acceptable	e))
625 BUTTERNUT PLACE LAKELAND FL 33813			83 25.50	TWILLIAMSbung D	<u>4</u>
LANCLA	ND FL 33013				
			84 City LA	KELOND	Fi 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statute	s, the above-named corp	poration submits this statement for the pr	urpose 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 27,0503, Florida Statutes.					
	RICHAND M. DEAK	Rill	Milesh		2/1/97
·	Signature typed or printed name of registered agen		Registered Agent signature require		DATE
12.	OFFICERS AND	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 Change Addition
NAME	NOVAK, CHARLES J		1.1 TITLE		FT CURURE FT MORRIOLI
STREET ADDRESS	1514 KIPLING LANE		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		1.4 CITY-ST-ZIP		
TITLE	PD	DELETE	2.1 TITLE		Change Addition
NAME	PRESTON, LARRY D		2.2 NAME		
STREET ADDRESS	7120 DAVIN STREET		2.3 STREET ADDRESS		
City-St-ZiP	LAKELAND FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition
NAME	CAMP, LIONEL S.		3.2 NAME		
STREET ADDRESS	1507 BLUE LAKE DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		3.4. CITY-ST-ZIP		
TITLE	VPD	L) DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MARKELL, DONALD		4.2 NAME		
STREET ADDRESS	542 PABLO STREET		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	LAKELAND FL	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME	VPD	LJ OLECIC	5.2 NAME		Change Addition
STREET ADDRESS	VANBAALEN, RICHARD L 375 W BRANNEN, ROAD #375	£	5.3 STREET ADDRESS		i
CITY - ST - ZIP	LAKELAND, FL 00000	,	5.4 CITY-ST-ZIP		
TOTLE	ST	DELETE	6.1 TITLE 7		Change Addition
NAME	ESHBACH, ALTON R.	/	. , -		
STREET ADDRESS	625 BUTTERNUT PLACE		6.3 STREET ADDRESS	CHAND M. DERK 55 Williams burg 59	1
CITY+S1-ZIP	LAKELAND FL		6.4 CITY-ST-ZIP	KECAND PL 338C	'g
		with this filing doop not evalify		in Section 119 07/3Vi) Florida Statutos	1.6 - 15

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 it 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:

RICHARD M. DERA

REQUIPAGED!

94-646-0822

FILED

Feb 06 1997 8:00am

Secretary of State