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Feb 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra E. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 710203 (1)
 1. Corporation Name
LAKELAND SHRINE CLUB HOLDING CORPORATION, INC.



Principal Place of Business 125 W BRANNEN ROAD LAKELAND FL 33813-2706 US	Mailing Address POST OFFICE BOX #5244 LAKELAND FL 33807-5244 US
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3. Date incorporated or Qualified 01/17/1966
4. FEI Number 23-7081982
Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
DERK, RICHARD M.
1555 WILLIAMSBURG SQ.
LAKELAND FL 33803

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 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	D NOVAK, CHARLES J	1.1 TITLE
NAME	1514 KIPLING LANE	1.2 NAME
STREET ADDRESS	LAKELAND FL	1.3 STREET ADDRESS
CITY - ST - ZIP		1.4 CITY - ST - ZIP
TITLE	PD PRESTON, LARRY D	2.1 TITLE
NAME	7120 DAVIN STREET	2.2 NAME
STREET ADDRESS	LAKELAND FL	2.3 STREET ADDRESS
CITY - ST - ZIP		2.4 CITY - ST - ZIP
TITLE	D CAMP, LIONEL S.	3.1 TITLE
NAME	1507 BLUE LAKE DR.	3.2 NAME
STREET ADDRESS	LAKELAND FL	3.3 STREET ADDRESS
CITY - ST - ZIP		3.4 CITY - ST - ZIP
TITLE	VPD MARKELL, DONALD	4.1 TITLE
NAME	542 PABLO STREET	4.2 NAME
STREET ADDRESS	LAKELAND FL	4.3 STREET ADDRESS
CITY - ST - ZIP		4.4 CITY - ST - ZIP
TITLE	VPD VANBAALEN, RICHARD L	5.1 TITLE
NAME	375 W BRANNEN, ROAD #375	5.2 NAME
STREET ADDRESS	LAKELAND, FL 00000	5.3 STREET ADDRESS
CITY - ST - ZIP		5.4 CITY - ST - ZIP
TITLE	T DERK, RICHARD M.	6.1 TITLE
NAME	1555 WILLIAMSBURG SQ.	6.2 NAME
STREET ADDRESS	LAKELAND FL	6.3 STREET ADDRESS
CITY - ST - ZIP		6.4 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Richard M. Derk* **RECEIVED** *1/23/98* *941-646-0822*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRE037 (10/97)