FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

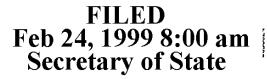
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 710203

1. Corporation Name

LAKELAND SHRINE CLUB HOLDING CORPORATION INC

5244 5244
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02-24-1999 90207 009 ****61.25

125 W BRANN LAKELAND FL US									
2. Principal F	Place of Business	2a. Mailing Address				3. Date Incorporated or Qualifed			
21		26				01/17/1966			
Suite, Apt. #, etc.						4. FEI Number 23-7081982			plied For
22 27						23-700 1802			t Applicable
City & State		City & State	City & State			5. Certificate of Status Desired		\$8.75 A Fee Rec	
Zip	Country	Zip	Cour			6. Election Campaign Financing		\$5.00	
24	25	29	30			Trust Fund Contribution		Added to	o Fees
	9. Name and Address of Curren	t Registered Agent	——————————————————————————————————————	1		10. Name and Address of New F	Registered	Agent	
			1	B1	Name				
DERK, RIC	DERK, RICHARD M.			82	Street Addre	ess (P.O. Box Number is Not Accepta	able)		
1555 WILLIAMSBURG SQ.									
LAKELAND) FL 33803			83					1
			Ī	B4	City		FL	85 Zip C	ode
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 orinted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
				gent s	signature required	ADDITIONS/CHANGES TO OF		ND DIRECTO	RS IN 12
12.	OFFICERS AND DIRECTORS 13		1.1 1111		 1	ADDITIONS/CHANGES TO OF	TOLKS A	Change	Addition
TITLE	D	™ DELETE						CI Ontango	
NAME	NOVAK, CHARLES J		1.2 NAM						1
STREET ADDRESS	1514 KIPLING LANE				VDDRESS				ŀ
CITY-ST-ZIP	LAKELAND FL	☐ DELETE	1.4 CITY		ZIP			☐ Change	Addition
TITLE	PD	C) DETELE	2.1 TITL		1			□ onange	
NAME	PRESTON, LARRY D		2.2 NAM						1
STREET ADDRESS	7120 DAVIN STREET		2.3 STRE			•	٠.	• •	\
CITY-ST-ZIP	LAKELAND FL	☐ DELETE	2. 4 CITY		ZIP			☐ Change	Addition
TITLE	D	() DELETE						□ cuanãa	
NAME	CAMP, LIONEL S.				1				ĺ
STREET ADDRESS	1507 BLUE LAKE DR.				ADDRESS				1
CITY-ST-ZIP	LAKELAND FL	☐ DELETE	3.4. CITY		ZIP			Change	Addition
TITLE			4.1 (11.0 4, 2 NAM					C) ourigo	
NAME	INFORTECT DOTATED]
	OIL TIBLE OFFICE				ADORESS (•			
CITY-ST-ZIP	LAKELAND FL	☐ DELETE	4.4 CIT		ZIP			☐ Change	Addition
TITLE	VANDAALEN DICHADD I	□ perei£	5.1 TITLE 5.2 NAME						
NAME	VANDAALLIA, RICHARD L				ADDRESS				
STREET ADDRESS	375 W BRANNEN, ROAD #375		5.4 CITY						ļ
CITY-ST-ZIP	LAKELAND, FL 00000	☐ DELETE	6.1 TITL		ZIF'			☐ Change	Addition
TITLE	DEDIC BIOLOGO		6.2 NAM		ĺ			□] Omminge	
NAME	DERK, RICHARD M.		1	-	LODGECC				ţ
	i i oo witti uu oo:				ADDRESS				ſ
CITY-ST-ZIP	ľakeľánd fl		6.4 CITY	'-ST-	ZIP				

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, with all other like empowered.

SIGNATURE: