## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED									
Feb 26 1998 8:00am									
Secretary of State									

DOCU 1. Corporation	MENT # 7	10400	(3)						
[	NG RECREATION						,		
Principal Plac	e of Business		Mailing Address						<b>                                    </b>
SEBRING RECREATION CLUB POST OFFICE BOX 802							3. Date Incorporated or Qualified		
POST OFFICE BOX 902 SEBRING FL 33871			POST OFFICE BOX 802 SEBRING FL 33871			02/21/1966			
US			US			4. FEI Number	1	Applied For	
2. Principal Place of Business			2a. Mailing Address				59-1144396		Not Applicable
21			26			6. Certificate of Status Desired		3.75 Additional Fee Required	
I Sulte Ant. #. etc			Suite, Apt. #, etc.			6. Election Campaign Financing		.00 May Be	
22			27			Trust Fund Contribution	□ Ad	ided to Fees	
City & State			City & State			7. Iş this nonprofit corporation a ho			
Zip Country			Zip Country				8. This corporation owes or has pai	Yes No	· · · · · · · · · · · · · · · · · · ·
24 25			29 30				Personal Property Tax due June		
	9. Name and Addres	s of Current R	egistered Agent				10. Name and Address of New Re		(
_	_			6	1 Name	SA	VILL, RICHARD		
SAVILL, RICHARD				Ē	2 Street	Addre:	ss (P.O. Box Number is Not Acceptab	le)	
648 N. RIDGEWOOD #14				-	13		8 N . RIDGEWOOD #14		
SEBRING FL 33870						SE	BRING FL 33870		
					4 City	SF	BRING F1 33870	FL 85	Zip Code 33870
11. Pursuant	to the provisions of Section	ons 617.0502 ar	nd 617.1508, Florida Statu	ites, the abo	ve-named	corpo	ration submits this statement for the p	urpose of chan	ging its registered
ottice or r agent. I a	egistered agent, or both, m familiar with, and acce	in the State of F opt the obligation	-lorida. Such change was ns of, Section 617.0503, F	authorized Iorida Statu	by the cor les.	poratio	ration submits this statement for the pin's board of directors. I hereby accept	t the appointme	ant as registered
SIGNATURE .									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: F  12. OFFICERS AND DIRECTORS				TE: Registered /	tgent signature	required	d when reinstalling) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRE	CTORS IN 12
TITLE	P		DELETE		1.1 TITLE P		ADDITIONO/OFFARIAGO TO OFFIC	☐ CI	
NAME	SAVILL, RICHARD			1.2 NAME		ı ·	VILL, RICHARD		
STREET ADDRESS	648 N. RIDGEWOOD #14			1.3 STREET ADDRESS			8 N. Ridgewood #14	÷	
CITY-ST-ZIP	SEBRING FL 33870			1.4 CITY - ST - ZIP			BRING FL 33870		
TITLE	VP		☐ DELETE	2.1 TITL	2.1 TITLE			☐ CI	hange
NAME	HUNDLEY, JAMES			2.2 NAME			NDLEY, JAMES		
STREET ADDRESS	3651 HWY 27 S. #				ET ADDRESS		51 HWY 27 S. #60		
CITY-ST-ZIP TITLE	SEBRING FL 33872	2. <u> </u>	DELETE	2.4 CIT 3.1 TITL	/-ST-ZIP	<u>5</u> E	BRING FL 33872	<b>√</b> Cr	hange Addition
NAME	LOVELAND, FRANK	/ D	been	3.7 HE		1 -	DMAN VERNON I	<b>X</b> -1 51	ango 🗀 Addition
STREET ADDRESS	4450 DESOTO RD.				ET ADDRESS	44	RMAN, VERNON L. 24 Elson Ave.		
CITY-ST-ZIP	SEBRING FL	LO1 75			-ST-ZIP		BRING. FL. 33872		
TITLE	VP		☐ DELETE	4.1 TITL		VP	VIVIO - 1	Cr	hange Addition
NAME	HOOVER, BEA			4. 2 NAN	AE.	1	OVER, BEA		
STREET ADDRESS	1703 PROSPECT S	ST.		4.3 STRE	ET ADDRESS		03 PROSPECT ST.		
CITY-ST-ZIP	Sebring FL	· · · · · · · · · · · · · · · · · · ·		4.4 CITY	-ST-ZIP		BRING FL 33870		
TITLE	D		☐ DELETE	5.1 TITLE		D	• • •	CI	hange Addition
NAME	BISHOP, ROY			5.2 NAM			SHOP, ROY		
STREET ADORESS	820 POMEGRANAT				ET ADDRESS		POMEGRANATE		
CITY-ST-ZIP	SEBRING FL 33870	J	DELETE		-ST-ZIP		BRING FL. 33870	☐ cr	hange
TITLE	1 KNEPP, NOAH		I'I DEFEIG	6.1 TITU		T	TOD MOAIL	_ U	KINDS T MODITION
NAME CTREET ADDRESS	2332 BURNING TR			6.2 NAM	ET ADDRESS	1	EPP, NOAH		
STREET ADDRESS City-St-Zip	SEBRING FL 33872				- ST-ZIP		32 BURNING TREE CIR.		
DH1-01-21F	APPLAISA I P 0001	<u>-                                      </u>		0.4 011 1	- UI - LIF		3RING FL 33872		

14. Thereby 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.

QHL 385.8917