

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711204

FILED
Jan 09, 2007
Secretary of State

Entity Name: GERMAN-AMERICAN SOCIAL CLUB OF CAPE CORAL, FLORIDA, INC.

Current Principal Place of Business:

2101 PINE ISLAND RD
CAPE CORAL, FL 33910

New Principal Place of Business:

Current Mailing Address:

P O BOX 150819
CAPE CORAL, FL 33915

New Mailing Address:

FEI Number: 23-7081446

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIS, STEPHEN D.
4020 DEL PRADO
SUITE A-1
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAJUSZ, HAROLD F
Address: 3616 COUNTRY CLUB BLVD.
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete
Name: TAMEDL, WILLIAM
Address: 1306 SE 26TH STREET
City-St-Zip: CAPE CORAL, FL 33904

Title: T () Delete
Name: EDGAR, MARY
Address: 166 SE 5TH. STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: S () Delete
Name: KUEHNLE, RENATE
Address: 1220 SW 35TH STREET
City-St-Zip: CAPE CORAL, FL 33914

Title: D () Delete
Name: EICHNER, STEVE
Address: 9470 PALM ISLAND CIRCLE
City-St-Zip: N.FORT MYERS, FL 33903

Title: VP D () Delete
Name: DENNER, GUENTHER
Address: 1452 SE 14TH STREET
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MICHENER, DAVID
Address: 3331 FOURTH AVENUE
City-St-Zip: ST. JAMES CITY, FL 33956

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAROLD F. BAJUSZ

PRES

01/09/2007

Electronic Signature of Signing Officer or Director

Date