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Mar 07 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711883 (9)
1. Corporation Name
DELAND SHRINE CLUB HOLDING CORPORATION, INC.



Principal Place of Business Mailing Address
CLARA AVE # 15A
PO BOX 222
DELAND FL 32721-7222
CLARA AVE # 15A
PO BOX 222
DELAND FL 32721-0222

3. Date Incorporated or Qualified 12/01/1966 3a. Date of Last Report 03/08/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country 30
24 25 26 27 28 29 30

4. FEI Number 59-6135883 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
GILLINGHAM, BAGLEY T.
511 W MINNESOTA AVE.
DELAND FL 32720
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE T PAISH, WILLIAM 136 MILLS RD DELAND, FL 00000
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE S GILLINGHAM, BAGLEY T. 511 W MINNESOTA AVE DELAND FL
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE D NICHOLSON, JACK 227 N. KEPLER ROAD DELAND FL 32724
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE PD SCHROEDER, FRANK 114 CHESTNUT ST. LAKE HELEN FL 32744
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE VD HOUSEND, JAMES 11556 LAKESIDE DRIVE DELAND FL 32720
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE V HENNING, ROBERT 29 VOLUSIA DRIVE DEBARY FL 32713
NAME
STREET ADDRESS
CITY - ST - ZIP
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE T. JACK RAY 1690 BEASLEY DR. DELAND, FL. 32720
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE D. FRANK SCHROEDER 114 CHESTNUT ST. LAKE HELEN, FL. 32744
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE PD JAMES HOUSEND 1556 LAKESIDE DR. DELAND, FL. 32720
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE VD ROBERT HUTCHINSON 1099 CRESCENT PARKWAY DELAND, FL. 32724
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE V. JAMES WARD, JR. 1260 FLAMINGO COURT DELAND, FL. 32720
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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: Bagley Gillingham BAGLEY GILLINGHAM FEB. 23, 1997 (904) 738-2663
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0013451

CR2E037 (9/96)