

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 19, 1999 8:00am
Secretary of State

02-19-1999 90040 028 *****61.25



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

NONPROFIT CORPORATION
 ANNUAL REPORT
1999

DOCUMENT # 717587

1. Corporation Name
M. T. CLUB, INC.

Principal Place of Business
**60 WEST PELICAN ST.
 ISLES OF CAPRI
 NAPLES FL 33962**

Mailing Address
**60 WEST PELICAN ST.
 ISLES OF CAPRI
 NAPLES FL 33962**



2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified	
21		26		11/09/1969	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1439515	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		29		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25		30		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		Trust Fund Contribution	
25		30		<input type="checkbox"/>	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HUMPHREVILLE, JOHN D QUARLES & BRADY 4501 TAMIAMI TRL N, #300 NAPLES FL 34103				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

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 _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	REMLEY, FRANK		
	60 W PELICAN ST 501		
	NAPLES FL		
VD	THRASH, CLYDE		
	60 W PELICAN ST 405		
	NAPLES FL		
TD	INNIS, ANNA		
	60 W PELICAN ST 307		
	NAPLES FL		
SD	BETZ, ANN MARIE		
	60 W PELICAN ST, #804		
	NAPLES FL 34113		
MD	ALLEN, LILLIAN G		
	60 W PELICAN ST, #108		
	NAPLES FL 34113		
DVP	SIMON, LEE		
	60 W PELICAN ST 306		
	NAPLES FL		

4. 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: *Frank Remley*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 2/1/99 (944) 394-3058

CR2E037 (11/98)