

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 718584

(6)

1. Corporation Name

SUPERVISORS SOCIAL CLUB, INC.



Principal Place of Business

1257 SURREY GLEN ROAD
MIDDLEBURG FL 32068

Mailing Address

1257 SURREY GLEN ROAD
MIDDLEBURG FL 32068

3. Date Incorporated or Qualified
05/26/1970

3a. Date of Last Report
04/13/1995

2. Principal Place of Business

21 3310 Old Jennings Road

2a. Mailing Address

26 3310 Old Jennings Road

4. FEI Number

59-7101748

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

City & State

23 Middleburg, Florida

City & State

28 Middleburg, Florida

Zip

24 32068

Country

25 Clay

Zip

29 32068

Country

30 Clay

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUCHANAN, RUSSELL W.
1257 SURREY GLEN ROAD
MIDDLEBURG FL 32068

81 Name

Ralph Story

82 Street Address (P.O. Box Number is Not Acceptable)

4962 Red Pine Court

83

Jacksonville, Florida 32210

84 City

FL

85 Zip Code

32210

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 obligation of, Section 617.0503, Florida Statutes.

SIGNATURE

Ralph Story
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-16-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME MISNER, RUSSELL F.
STREET ADDRESS 3213 RIVER RD.
CITY-ST-ZIP GREEN COVE SPRINGS FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE C ☒ DELETE
NAME BUCHANAN, RUSSELL W.
STREET ADDRESS 1257 SURREY GLEN ROAD
CITY-ST-ZIP MIDDLEBURG FL

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME C
2.3 STREET ADDRESS Story, Ralph
2.4 CITY-ST-ZIP 4962 Red Pine Court
Jacksonville, FL 32210

TITLE S ☐ DELETE
NAME SILVERIA, NANCY
STREET ADDRESS 714 HIGHLANDS AVE
CITY-ST-ZIP GREEN COVE SPRINGS FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME BARGE, WILLIAM M.
STREET ADDRESS 4855 ORTEGA FARMS BLVD
CITY-ST-ZIP JACKSONVILLE FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME LEEDS, SOMERS E
STREET ADDRESS 944 LAKE ASBURY DR
CITY-ST-ZIP GREEN COVE SPRINGS FL

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME V
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V ☒ DELETE
NAME ROHWELLER, DONALD T.
STREET ADDRESS 11437 JOHN DORY WAY
CITY-ST-ZIP JACKSONVILLE FL

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D
6.3 STREET ADDRESS Beaudoin, Henry
6.4 CITY-ST-ZIP 2490 Halpers Way
Middleburg, FL 32068

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Ralph Story
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/96

Date

904-771-7478

Daytime Phone #

CR2E037 (12/95)