

FILE NOW: FILING FEE IS \$61.25

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Aug 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morfham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **719177** (8)

1. Corporation Name

**LAVILLA SPORTSMAN CLUB, INC.**

Principal Place of Business

Mailing Address

**7877 NEW KINGS ROAD  
JACKSONVILLE FL 32209**

**32219-3630**

**7877 NEW KINGS ROAD  
JACKSONVILLE FL 32209**

**32219-3630**

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip

Country

**28** Zip

Country

**24**

**25**

**29**

**30**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**08/21/1970**

4. FEI Number

**23-7079033**

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**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**MADDOX, RON E.  
5045190 SHERWOOD SQUARE  
SOUTEL DR. W.  
JACKSONVILLE FL 32208**

**81** Name  
**VENCIENT'S BUSINESS SERVICES**  
**82** Street Address (P.O. Box Number is Not Acceptable)  
**6325 ARLINGTON ROAD**  
**(ROWLAND V. WILLIAMS)**  
**83** City  
**JACKSONVILLE, FL**  
**84** Zip Code  
**32211**

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

*Rowland V. Williams* **May 29, 1998**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**PD** ☐ DELETE  
**NAME** MITCHELL, WILLIE C  
**STREET ADDRESS** 2754 DELLWOOD AVE.  
**CITY-ST-ZIP** JACKSONVILLE FL 32205

**SD** ☒ DELETE  
**NAME** SILLS, JAKE  
**STREET ADDRESS** 952 W. BEAVER ST.  
**CITY-ST-ZIP** JACKSONVILLE FL 32206

**PB** ☒ DELETE  
**NAME** DRAXTON, CLARENCE  
**STREET ADDRESS** 8503 BUCKINGHAM RD.  
**CITY-ST-ZIP** JACKSONVILLE FL 32208

**B** ☐ DELETE  
**NAME** RILEY, JOHN  
**STREET ADDRESS** 4611 CLYDE DR.  
**CITY-ST-ZIP** JACKSONVILLE FL 32208

**TD** ☐ DELETE  
**NAME** BELL, GEORGE  
**STREET ADDRESS** 3308 RIBAUT SCENIC DR.  
**CITY-ST-ZIP** JACKSONVILLE FL 32208

**OVP** ☐ DELETE  
**NAME** JEWELL, JAMES  
**STREET ADDRESS** 8755 FOURTH AVE.  
**CITY-ST-ZIP** JACKSONVILLE FL 32208

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1 TITLE** **SD** **WILLIE BROWN JR** ☐ Change ☒ Addition  
**1.2 NAME** **8005 TARIING AVE**  
**1.3 STREET ADDRESS** **JACKSONVILLE FLA 32219**  
**1.4 CITY-ST-ZIP**

**2.1 TITLE** **FS** ☐ Change ☒ Addition  
**2.2 NAME** **ARTHUR C PERRY**  
**2.3 STREET ADDRESS** **2683 SANDUSKY AVE E**  
**2.4 CITY-ST-ZIP** **JACKSONVILLE FLA 32216**

**3.1 TITLE** **D** ☐ Change ☐ Addition  
**3.2 NAME** **HENRY L. SELLERS**  
**3.3 STREET ADDRESS** **1507 N. CARBORDALE DRIVE**  
**3.4 CITY-ST-ZIP** **JAX FL 32208**

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

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

**6.1 TITLE** ☐ Change ☐ Addition  
**6.2 NAME**  
**6.3 STREET ADDRESS**  
**6.4 CITY-ST-ZIP**

14. 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.

SIGNATURE:

*James B. Bell*

**2/10/98**

**9847644058**

CR2E037 (10/97)