

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 # 719676 (9)

1. Corporation Name

EAST BAY OAKS RESIDENTIAL CLUB, INC.



Principal Place of Business

Mailing Address

601 STARKEY RD
252
LARGO FL 34641
US

601 STARKEY RD LOT 252
LARGO FL 34641
US

3. Date Incorporated or Qualified
11/10/1970

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
59-1784972

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

10. Name and Address of New Registered Agent

SCHWEITZER JON
601 STARKEY RD, LOT 252
LARGO FL 34641

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 VD ☐ DELETE
NAME SCHWEITZER, JON
STREET ADDRESS 601 STARKEY RD, #252
CITY-ST-ZIP LARGO, FL 00000

TITLE TD ☐ DELETE
NAME HUDSON, THERESA
STREET ADDRESS 601 STARKEY RD 39
CITY-ST-ZIP LARGO, FL 00000

TITLE SD ☒ DELETE
NAME BRADFORD, PHYLLIS
STREET ADDRESS 601 STARKEY RD 302
CITY-ST-ZIP LARGO, FL 00000

TITLE D ☒ DELETE
NAME ZIETZ, ROBERT
STREET ADDRESS 601 STARKEY RD 274
CITY-ST-ZIP LARGO, FL 00000

TITLE VD ☐ DELETE
NAME WHITE, MARGARET
STREET ADDRESS 601 STARKEY RD., #108
CITY-ST-ZIP LARGO, FL 00000

TITLE PD ☐ DELETE
NAME SNIDER, HERBERT
STREET ADDRESS 601 STARKEY RD., #276
CITY-ST-ZIP LARGO, FL 00000

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

SD
MURRAY, LAURETTE
601 STARKEY RD. 104
LARGO, FL 00000

D
JELLINEK, ALTHEA
601 STARKEY RD. 310
LARGO, FL 00000

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 my address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Theresa Hudson

4-23-96

(813) 536-0821

Date

Daytime Phone #

CR2E037 (12/95)