

# FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 14 PM 2:25

DOCUMENT # 721860 (5)

1. Corporation Name

DOVER CIVIC CLUB, INC.

Principal Place of Business

Mailing Address

2820 GALLAGHER RD.  
P.O. BOX 702  
DOVER FL 33527

2820 GALLAGHER RD.  
P.O. BOX 702  
DOVER FL 33527

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/11/1971  
3a. Date of Last Report 02/16/1994  
4. FEI Number 59-1914137  
Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

20 P.O. BOX 702

22 City & State

27 City & State

23 Zip

Country

28 DOVER FLA

29 Zip

33527

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALDEN, JIM  
13524 S.R. 574  
DOVER FL 33527

81 Name DEWAYNE BINGHAM  
82 Street Address (P.O. Box Number is Not Acceptable) 3640 SUMNER ROAD  
83 P.O. BOX 1625  
84 City DOVER, FL  
85 Zip Code FL 33527

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

*Dewayne Bingham*

DEWAYNE BINGHAM

DATE FEB 10, 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P  
12 NAME LOKAR, R W  
13 STREET ADDRESS 13101 LEE GALLAGHER RD  
14 CITY-ST-ZIP DOVER, FL 00000  
21 TITLE V  
22 NAME BINGHAM, LINDA J.  
23 STREET ADDRESS 3640 SUMNER RD  
24 CITY-ST-ZIP DOVER, FL 00000  
31 TITLE DT  
32 NAME BINGHAM, DEWAYNE  
33 STREET ADDRESS 3640 SUMNER RD.  
34 CITY-ST-ZIP DOVER, FL 00000  
41 TITLE S  
42 NAME MARTIN, SHIRLEY  
43 STREET ADDRESS 1825 JAUDON RD.  
44 CITY-ST-ZIP DOVER, FL 00000  
51 TITLE D  
52 NAME WALDEN, JIM  
53 STREET ADDRESS 13524 SR 574  
54 CITY-ST-ZIP DOVER FL  
61 TITLE D  
62 NAME HIERS, R.L.  
63 STREET ADDRESS 4530 SWINGER RD.  
64 CITY-ST-ZIP DOVER FL

11 TITLE P  
12 NAME MC CLELLAND, DEECEE  
13 STREET ADDRESS 4013 GALLAGHER ROAD  
14 CITY-ST-ZIP DOVER, FLA. 33527  
21 TITLE T  
22 NAME BINGHAM, LINDA J  
23 STREET ADDRESS 3640 SUMNER ROAD  
24 CITY-ST-ZIP DOVER, FLA. 33527  
31 TITLE V/ DT  
32 NAME BINGHAM, DEWAYNE  
33 STREET ADDRESS 3640 SUMNER RD  
34 CITY-ST-ZIP DOVER, FLA. 33527  
41 TITLE S  
42 NAME TILLMAN, SHARON  
43 STREET ADDRESS 2806 DQA WELDON RD  
44 CITY-ST-ZIP DOVER, FLA. 33527  
51 TITLE D  
52 NAME CAMPBELL, CLAUDETTE  
53 STREET ADDRESS 4312 GALLAGHER ROAD  
54 CITY-ST-ZIP DOVER, FLA. 33527  
61 TITLE D  
62 NAME HEIRS, R L  
63 STREET ADDRESS 4530 SWINGER ROAD  
64 CITY-ST-ZIP DOVER, FLA. 33527

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 111.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 of this statement.

SIGNATURE

*Linda Jean Bingham VP.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Jan. 26, 1995*

813-659-0003