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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

| FILED |
|--------------------|
| Mar 23 1998 8:00am |
| Secretary of State |

| THE V | VEST VOLUSIA COLUMBIAI | N CLUB, INC. | | | | | Ħ | |
|---|---|--|----------------------------|------------------------------|--|---|--------|--|
| Principal Place of Business Mailing Address | | | | | | a maann masia nigii anasi faano nisara anki arabi akani akani arabi arabi arabi arabi anaki di | iti | |
| 201 SPEEDWAY MEMORIAL HWY. P. O. BOX 601 DELAND FL 32721-0601 | | 201 SPEEDWAY MEMORIAL HWY. P. O. BOX 601 DELAND FL 32721-0601 | | | 3. Date Incorporated or Qualified 11/06/1972 4. FEI Number Applied For | | | |
| | Place of Business | 2a. Mailing Address | — | | | 23-7541531 Not Applic 6. Certificate of Status Desired \$8.75 Addition: | | |
| Suite, Apt | 4 Ma | 26 | | | | Fee Required | | |
| 22 Suite, Apr | #, BIG. | Suite, Apt. #, etc. | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | |
| City & Sta | ite | City & State | | | | 7. Is this nonprofit corporation a homeowners association? | | |
| 23 | | 28 | | | | ☐ Yes 🔣 No | | |
| Zip | Country | Zip | | untry | | 8. This corporation owes or has paid the current year intangible | | |
| 24 | 26 9. Name and Address of Curre | 29 ant Registered Agent | [30] | r | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | | |
| | | The state of the s | | 81 1 | | (V. Hallo Billo Rushass of Hall hagisteled Agelic | | |
| JOHNS | ON, F. A. | | | - | N A | | | |
| | MELIA LANE | | | 82 8 | Street Add | dress (P.O. Box Number is Not Acceptable) | | |
| DELANI | O FL 32720 | | ľ | 83 | | | | |
| | | | ŀ | 84 (| City | 85 Zip Code | | |
| <u> </u> | | | | | • | FL (**) | | |
| 11. Pursuant office or | to the provisions of Sections 617.05 registered agent, or both, in the State | 02 and 617.1508, Florida Statu e of Florida. Such change was | utes, the at authorized | bove-n d by th | amed corp e corpora | poration submits this statement for the purpose of changing its registeration's board of directors. I hereby accept the appointment as register | ed | |
| agent. La | am familiar with, and accept the oblig | gations of, Section 617.0503, F | Iorida Stat | tutes. | | | | |
| SIGNATURE | Signature, typed or printed name of registered ag | pent and title if applicable (NC | TF: Registerer | d Acent e | costure recul | elred when reinstating) DATE | | |
| 12. | | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | P | ☐ DELETE | 1.1 10 | TLE | | Change Add | lition | |
| NAME | HOFFMAN, FRED | | 1.2 NA | 1.2 NAME | | | | |
| STREET ADDRESS | 107 WILEY AVE. | | 1.3 ST | treet adi | XRESS | | | |
| CITY-ST-ZIP | DELAND, FL 00000 | | 1.4 CH | 1.4 CITY - ST - ZIP | | | | |
| TITLE | VP DUGAN DODGOT | ☐ DELETE | | 2.1 TITLE | | L_I Change L_I Add | dition | |
| NAME | DUGAN, ROBERT | | 2.2 NA | | | | | |
| STREET ADDRESS | 1040 ROLLING ACRES DR | | | 2.3 STREET ADD | | | | |
| CITY-ST-ZIP TITLE | DELAND FL ST | DELETE | _ | 2.4 CITY-ST-ZIP 3.1 TITLE | | ☐ Change ☐ Ado | tition | |
| NAME | JOHNSON, F. A. | beer ne | | 3.2 NAME | | Citaliye Auc | MION | |
| STREET ADDRESS | 527 CAMELIA LANE | | 1 | REET ADD | MEGG | | | |
| CITY-ST-ZIP | DELAND FL | | | ITY-ST-Z | | | | |
| TITLE | D | ☐ DELETE | | 4.1 TITLE | | ☐ Change ☐ Add | lition | |
| NAME | GAUVINE, RONALD | | 4. 2 NJ | 4. 2 NAME | | _ • _ | | |
| STREET ADDRESS | 238 W RICH AVE. | | 4.3 ST/ | REET ADD | RESS | | | |
| CITY-ST-ZIP | DELAND FL | | 4.4 CIT | TY - ST - ZI | Р | | | |
| TITLE | D | ☐ DELETE | 5.1 TIT | 5.1 TITLE | | ☐ Change ☐ Add | ition | |
| NAME | FOELKER, DANIEL | | 5.2 NA | IME | | | | |
| STREET ADDRESS | 1701 FOELKER RD. | | 5.3 STF | REET ADD | RESS | | | |
| CITY-ST-ZIP | DELAND FL | | 5.4 CIT | TY-ST-ZI | Р | | | |
| TITLE | D | ☐ DELETE | 6.1 717 | TLE | | ☐ Change ☐ Add | ition | |
| NAME | KOSTKA, PAUL | | 6.2 NAI | ME | | | | |
| STREET ADORESS | 566 E WISCONSIN AVE | | 6.3 STF | REET ADD | RESS | | | |
| CITY+ST-7IP | I ORANGE CITY FI | | | TV - CT - 71 | | | | |

SIGNATURE:

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 cath; that I am an officer or director of the corporation or the reflected or frustee 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 of an interpretable of the corporation of the 904-134-0675 904-734-4461