FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

725102

(8)

ORANGE BROOK SUNSHINE CLUB, INC.					
Principal Place	e of Business	Mailing Address		I seditt stofe tradt ditet stots geste	LIMI MIMIT ELEIN DINNI MINII NENII NINII 1001
3318 ORANGE ST 3213 BROADWAY 8T HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-8371 US					
				3. Date Incorporated or Qualified 12/21/1972	3a. Date of Last Report 04/23/1996
	ace of Business	2a. Mailing Address		4. FEI Number 23-7356943	Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, et		Suite Ant # etc		25-7330543	Not Applicable \$8.75 Additional
<u> </u>		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country 25	Zip 3	Country	8. This corporation has liability for Florida Statutes	Intangible tax under s. 199.032, ☐ Yes
24	9. Name and Address of Curren		<u> </u>	10. Name and Address of New Re	
			81 Name	Kather Euc	pol/
OESCHER, ED				ddress (P.O. Box Number is Not Acceptate	
1305 SOUTH 33RD AVE.			20	· · · · · · · · · · · · · · · · · · ·	
HOLLYWOD FL 33021			83	1,3 Groadwi	19 04
			84 City	ollywood	FL 85 Zin 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 647.0503, Florida Statutes.					
SIGNATURE	Signature typed or printed name of registered age	//////////////////////////////////////	Registered Agent signature re	apulted what reinstation)	DATE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	OESCHER, ED		1.2 NAME	Dener	9 di
STREET ADDRESS	1305 SOUTH 33RD AVE.		1.3 STREET ADDRESS	3300 Brove	TWOY ST
CITY-ST-ZIP TITLE	HOLLYWOOD FL 33021	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		☑ Change ☐ Addition
THE THE	WHITE, ERMA	o	2.2 NAME	ROW KEEDE	
STREET ADDRESS	3229 SOUTH STREET		2.3 STREET ADDRESS	13/4/3 350	ing
CITY-ST-ZIP	HOLLYWOOD FL 33021		2.4 CITY-ST-ZIP	<i>*- ', </i>	
TITLE	\$	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	KNOWLES, LOIS		3.2 NAME		
STREET ADDRESS	3205 BROADWAY ST		3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	HOLLYWOOD FL D	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	ZUENDEL, KATHY	000000	4.2 NAME		
STREET ADDRESS	3213 BROADWAY ST.		4.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZiP 6.1 TITLE		Change Addition
NAME			6.2 NAME		الواقعة في المالية الم
STREET ADDRESS			6.3 STREET ADDRESS		
City - ST - 7iP			64 C/TY+ST-7/P		

14. I do 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:

SIGNATURE AND TYPED OF SINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone # 0021852

FILED

May 13 1997 8:00am

Secretary of State