## FILE NOW: FILING FEE IS \$61.25

NONPROFIT Apr 23 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B.-Morthary ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** 727677 (7) MEN'S CLUB OF ST. MAURICE, INC. Principal Place of Business Mailing Address 2851 STIRLING ROAD 2851 STIRLING ROAD 3. Date Incorporated or Qualified FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 <u>10/08/1973</u> 4. FEI Number Applied For 05-0219100 Not Applicable 2. Principal Place of Business 2e. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 22 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No 23 28 Zip Country Country This corporation owes or has paid the current year Intangible ☐ Yes 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 BURRITT JR. WESLEY E Street Address (P.O. Box Number is Not Acceptable) 82 9587 NW 52ND AVE 83 SUNRISE FL 33351 84 City Zip Code Pursuant to the provisions of Sections 617.0502 and 617.1508, Floride 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1 1 TITLE NAPOLEON, TONY NAME 1.2 NAME 2441 SW 86TH TERR STREET ADDRESS 1.3 STREET ADDRESS MIRAMAR FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE ĎΫ 2.1 TITLE AMADOR BENGOCHEA 681 N.W. 66TH AVE AMADOR JONES, WILLIAM T NAME 22 NAME 10478\_SW-53RD-ST STREET ADDRESS 2.3 STREET ADDRESS PLANTATION, FL. 33317 COOPER CITY FL CITY-ST-ZIP 2.4 CITY-ST-ZIP SECRETARY DELETE Change Addition TITLE 3.1 TITLE MICHAEL CONNOLLY BISHOP, JUM 3.2 NAME NAME 2454 TORTUGAS LN. 300 S 8TH AVE STREET ADDRESS 3.3 STREET ADDRESS HOLLYWOOD FL LAVOER DALE LAKES 333/A CITY-ST-2IP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition BURRITT JR. WESLEY E NAME 4.2 NAME GEORGE COLEST. 9567 NW 52ND MANO STREET ADDRESS 4.3 STREET ADDRESS T. LAUDERDALE FL. 33309 SUNRISE FL CITY-S1-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE RON SHELTON NAME 5.2 NAME 5840 SW 40TH TEMP 5.3 STREET ADDRESS STREET ADDRESS FT LAUDER DALL FL CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition GEVENZ CONE NAME MATT MEHRINGER 6.2 NAME STREET ADDRESS 3137 N. 4151CT. 6.3 STREET ADORESS HOLLY WOOD FL. 337/2 6.4 CITY - ST - ZIP 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 as attachment with an address.

FILED

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