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NONPROFIT CORPORATION

DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

(2)

Secretary of State DIVISION OF CORPORATIONS

ANNUAL REPORT 1998

731686

FILED Jan 29 1998 8:00am Secretary of State

HUDS	ON SEHTOMA GLUB, INC.						
Principal Plac	e of Business	Mailing Address					
9750 SUNBEAR P. O. BOX 603 NEW PT. RICH US	37	9750 Sunbeam Dr. P. O. Box 6037 New Pt Richey Fl 34654 US			3. Date Incorporated or Qualified 01/21/1975 4. FEI Number 59-2386381 Not Applicable		
	lace of Business	28. Mailing Address			 .	5. Certificate of Status Desired \$8.75 Additional	
21 Suite, Apt. #, etc. 22		26			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State		City & State			7. Is this nonprofit corporation a horneowners association?		
Zip 24	Country 25	Zip 3	Coun	itry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent	
B 4 A 7771 14	00 100FTT4 B		8	81 N	lame		
MAZZUCO, LORETTA R. 9750 SUNBEAM DR.			[8	82 S	Street Address (P.O. Box Number is Not Acceptable)		
NEW P	FRICHEY FL 34654		[83			
			1	84 C	lity	85 Zip Code	
agent. I a SIGNATURE	m familiar with, and accept the oblig					corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered equired when reinstalling)	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	DELETÉ	1.1 TITL	£			
NAME	OLSEN, DEBORAH		1.2 NAN	1.2 NAME		PO ☐ Change ☑ Addition Robert Suehla	
STREET ADDRESS	7917 KNIGHT DRIVE		1.3 STR	1.3 STREET ADDRESS		8410 AFTON LANE	
CITY-ST-ZIP	NEW PORT RICHEY FL		1.4 CITS	1.4 CITY-ST-ZIP		PORT RICHEY, F/ 34668	
TITLE	SD	DELETE	2.1 TITL	2.1 TITLE		☐ Change ☐ Additio	
NAME	MAZZUCO, LORETTA		2.2 NAN	2.2 NAME			
STREET ADDRESS	9750 SUNBEAM DRIVE		2.3 STREET ADDRESS		RESS		
City-st-zip	NEW PORT RICHEY FL		2, 4 CIT	2. 4 CITY-ST-ZIP			
TITLE	PD	DELETE		3.1 TITLE		Change Additio	
NAME	OLSEN, DAVID		3.2 NAME				
STREET ADDRESS	7917 KNIGHT DR.		1	3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	NEW PT. RICHEY FL	L] OELETE		3.4. CITY-ST-ZIP		Change Addition	
NAME		يا منداز	1	4.1 TILE 4.2 NAME		_ Change _ Auditto	
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		/BEGG		
CITY-ST-ZIP	}		1				
TITLE		DELETE		4.4 CITY - ST - ZIP 5.1 TITLE		Change Additio	
NAME	,	 -	5.2 NAME		- {		
STREET ADDRESS			5.3 STR	FFT ADD	IRESS		

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 an an attachment with an address. (813)

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CiTY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

868-8499