FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # 738048 (8)

1. Corporation Name

PANHANDLE SHRINE CLUB BUILDING ASSOCIATION, INC.

Principal Place of Business	Mailing Address
BRICKYARD ROAD (SR-280) P.O. BOX 212 CHIPLEY FL 32428	BRICKYARD ROAD (SR-280) P.O. BOX 212 CHIPLEY FL 32428

3. Date Incorporated or Qualified: 02/08/1977
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business — 21
2a. Mailing Address — 26

Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27

City & State — 23
City & State — 28

Zip — 24 Country — 25
Zip — 29 Country — 30

4. FEI Number: 59-2894461 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. **Name and Address of Current Registered Agent**

RUSSELL A. COLE, JR.
206 E. IOWA AVE
BONIFAY FL 32425

10. **Name and Address of New Registered Agent**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☒ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	MARTIN, JOE		1.2 NAME	Kenneth Hood	
STREET ADDRESS	476 PARAGON PL		1.3 STREET ADDRESS	4650 Wilderness Rd.	
CITY-ST-ZIP	SUNNY HILLS FL		1.4 CITY-ST-ZIP	Vernon, Fl 32462	
TITLE	D	☒ DELETE	2.1 TITLE	S/T	☒ Change ☐ Addition
NAME	CARTER, BRUCE		2.2 NAME	Vernon J. Nelson	
STREET ADDRESS	GLEN AVE		2.3 STREET ADDRESS	405 South Blvd. E.	
CITY-ST-ZIP	WAUSAU FL		2.4 CITY-ST-ZIP	Chipley, Fl 32428	
TITLE	TD	☒ DELETE	3.1 TITLE	D	☒ Change ☐ Addition
NAME	REGISTER, STEPHEN B., JR		3.2 NAME	Robert E. Keller	
STREET ADDRESS	1492 BRICKYARD RD		3.3 STREET ADDRESS	4728 Wilderness Rd.	
CITY-ST-ZIP	CHIPLEY FL		3.4 CITY-ST-ZIP	Vernon, Fl 32462	
TITLE	SD	☒ DELETE	4.1 TITLE	VP	☒ Change ☐ Addition
NAME	CARSWELL, DAVID C.		4.2 NAME	Henry Day	
STREET ADDRESS	FALLING WATERS RD.		4.3 STREET ADDRESS	Old Bonifay Rd.	
CITY-ST-ZIP	CHIPLEY FL		4.4 CITY-ST-ZIP	Vernon, Fl 32462	
TITLE	PD	☒ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	KING, EDDIE		5.2 NAME	Joe Martin	
STREET ADDRESS	RR 2 BOX 102		5.3 STREET ADDRESS	476 Paragon Pl.	
CITY-ST-ZIP	WESTVILLE FL		5.4 CITY-ST-ZIP	Sunny Hills, Fl 32428	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	PERRY, JEFF		6.2 NAME		
STREET ADDRESS	RR 2 BOX 836		6.3 STREET ADDRESS		
CITY-ST-ZIP	BONIFAY FL		6.4 CITY-ST-ZIP		

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Vernon J. Nelson — Feb. 20, 1996 — 904-638-4541
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #