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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

738401

(9)

CORONADO SOCIAL CLUB, INC.

Principal Place	of Business	Mailing	Mailing Address										
·													
20301 WEST COUNTRY CLUB DRIVE AVENTURA FL 33180 US			20301 WEST COUNTRY CLUB DRIVE AVENTURA FL 33180-1675										
		US					-	. Date Incorpora	ted or Quelified	3= 0	ate of Last F	Report	_
							"	03/18/19			02/09/19		
2. Principal Pl	ace of Business	2a. Ma	2a. Mailing Address				4	4. FEI Number				pplied For	
21		26					_	59-17219	348		⊢	ot Applicable	,
Suite, Apt. i	#, etc.	 	Suite, Apt. #, etc.				5	. Certificate of St	atus Desired			Additional equired	
City & State	3		y & State			·	6	Election Campa	aign Financing		\$5.00	May Be	
23		28	28				Trust Fund Contribution				Added to Fees		
Zip	Country	— h— n ′	Zip Co				8	8. This corporation has liability for intangible tax under s. 199.032,					
24	25	29	d Amont	30				Florida Statutes		Yes	No		_
	9. Name and Address of Currer	ıı negisiere	a våaut		81	Name	10). Name and Add	HOSE OF NEW MO	Aisteled	MUSTI		-
5	PN 0				B2								
TYE, HELEN S. 20379 WEST COUNTRY CLUB DRIVE # 2440						Street A	ddress (P.O. Box Numbe	r is Not Acceptab	ole)	_		
	EST COUNTRY CLUB DRIVE → RAFL 33180	TOUT	OUTEL		83						·····	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-
AVENIUM	W LF 22 100										T		_
					84	City			•	FL	85 Zip	Code	
11. Pursuant t	o the provisions of Sections 617.050	2 and 617.1	508, Florida Stat	tutes, the al	pove	-named	corporati	on submits this st	atement for the p	urpose c	of changing i	ts registered	_
office or re agent. Lar	egistered agent, or both, in the State in familiar with, and accept the oblig	e of Fiorida. S ations of, Se	ouch change wa ection 617.0503,	s autnorize Florida Stat	a by lutes	rine corp. 3.	oration's	poard of director	s. i nereby accep	ot the ap	pointment as	registered	
SIGNATURE													
	Signature, typed or printed hame of registered age			IOTE: Registere	d Age	int signature r	equired who		NIOCO TO OCCIO	DATE	D DIDECTO	DC IN 10	_
12.	OFFICERS AN	D DIRECTO	RS DELETE	13. 1,1 Ti	ŤI G	————	<i>I</i>		ANGES TO OFFIC		AL		_
TITLE	P MAZUD HINE		A DECEIL				Took	orke G	ordon	و مید	A STATISTICS	COURIDITION OF	,
NAME STREET ADDRESS	MAZUR, JUNE 20379 W. COUNTRY CLUB D	DIVE	*	1.2 N/		ADDRESS	30	335/1	Country	(Jub 1	Dr. BP	7, 405	
CITY-ST-ZIP	AVENTURA FL	MYE	. 🛦	1.3 SI			20	entura F	=/. }	3/8/	2		
TITLE	VP		DELETE	211		1-411	10		<u> </u>	<u> </u>	Change	dition	ı
NAME	ESFORMES, FLORENCE		7	22 N			/4 ro. 1	rb Klon	nons			-	
STREET ADDRESS	20301 W. COUNTRY CLUB D	RIVE	-	2351	TAEET	address	20	rbKlon 325 W nton	Country	Club	Driver	Aptil80	ši
CITY-ST-ZIP	AVENTURA FL			2.4 C	HTY-S	ST-ZIP	Ave	ntura	FL 331	80		/ /	•
TITLE	T		DELETE	3.1 1	TLE						Change	Addition	Ī
NAME	tye, Helen			3.2 N/	AME								
STREET ADDRESS	20379 W. COUNTRY CLUB D	R		3.3 ST	TREET	ADDRESS							
CITY-ST-ZIP	AVENTURA FL		C Decrete			ST-ZIP		· · · · · · · · · · · · · · · · · · ·			1 1 65	1 4 4 151	_
TITLE	D		☐ DELETE	4,1 16							Change	Addition	į
NAME	GORMAN, LEE	in ar		4. 2 N		1000000							
STREET ADDRESS	20379 W. COUNTRY CLUB D	HIVE		. L		ADDRESS							
CITY-ST-ZIP TITLE	AVENTURA FL		DELETE	5.1 TI		T-ZIP		·			☐ Change	Addition	 I
NAME	d Smolen, Joseph		La veceit	5.2 N								tend (Walling)	
STREET ADDRESS	20335 W CONTRY CLUB DR					ADDRESS							
CITY-ST-ZIP	AVENTURA FL		/									,	
TITLE	D		DELETE	6.1 TI			0		_ ^		Change	Addition	i
NAME	HANKIN, ETHEL		- 1	6.2 N	AME	ĺ	Floi	rence E	Storm	es	<i>'</i>	gre Umma	
STREET ADDRESS	20301 W. COUNTRY CLUB D	R.		6.3 \$1	TREET	ADDRESS	203	OLW. G	untryc	lubD	rive - t	チンはり	
CITY-ST-ZIP	N. MIAMI BEACH FL 33180		·	6.4 CI		T-ZIP	Ave	rence E Bol, W. Go Ny 2013 Section 119.07(3)	5/33/	80		······································	
14. I do hereb	by certify that the information supplie in indicated on this annual report or s	ed with this fil	ling does not qual appual report	alify for the	exe	mption st	ated in S	section 119.07(3)(i), Florida Statute	s. I furthe	er certify that as if made ur	t the ider oath: the	at
I am an of	fficer or director of the corporation of	r the receive	r or trustee emp	owered to a	эхес	ute this re	port as	required by Chap	ter 617, Florida S	statutes;	and that my	name	••
appears in	n Block 12 or Block 13 if changed, o	ะ จกลกสและ 	วแบคม พันษาสบาร	1001055.				,	,				