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Feb 24 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **741922** (9)

1. Corporation Name

**BUTTONS AND BOWS SQUARE DANCE CLUB, INC.**

Principal Place of Business

Mailing Address

**480 SOUTH INDIANA AVENUE  
ENGLEWOOD FL 34223-3702**

**480 SOUTH INDIANA AVENUE  
ENGLEWOOD FL 34223-3702**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**03/08/1978**

4. FEI Number

**59-1840394**

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**

7. Is this nonprofit corporation a homeowners association?  
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

**DICKINSON, ROBERT A.  
480 SOUTH INDIANA AVENUE  
ENGLEWOOD FL 34223**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

**P  
INGELS, ANN  
1415 CORTES DRIVE  
ENGLEWOOD FL**

☒ DELETE

**VP  
MILLER, BLAKE  
2510 ELEVENTH STREET  
ENGLEWOOD FL**

☒ DELETE

**S  
SMITH, JEAN  
1233 KINGFISHER DRIVE  
ENGLEWOOD FL**

☐ DELETE

**T  
CLAY, CARLENE M  
6 OUALS RUN BLVD, UNIT 12  
ENGLEWOOD FL**

☐ DELETE

**D  
CAMPBELL, EUGENE  
1278 KINGFISHER DRIVE  
ENGLEWOOD FL**

☐ DELETE

**D  
TALLIAN, JOHN  
618 LEISURE WATERWAY  
ST. VENICE FL**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

**P Kenneth W Robinson #93  
6796 Gasparilla Pns  
Englewood, FL 34224**

☒ Change ☐ Addition

**VP J.R. & Becky O'Diam  
845 72nd St  
Englewood FL; 34224**

☒ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 an attachment with an address.

SIGNATURE:

*Carlene M. Clay*

*Feb 14/1998*

*473-9288*

CR2E037 (10/97)