


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90063 009 ****61.25

DOCUMENT # 741922 1. Entity Name BUTTONS AND BOWS SQUARE DANCE CLUB, INC.					
Principal Place of Business 460 SOUTH INDIANA AVENUE ENGLEWOOD, FL 34223-3702			Mailing Address 460 SOUTH INDIANA AVENUE ENGLEWOOD, FL 34223-3702		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01292004 Chg-NP CR2E037 (10/03)	
4. FEI Number 59-1840394				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DICKINSON, ROBERT A. 460 SOUTH INDIANA AVENUE ENGLEWOOD, FL 34223			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	COLLINS, KEN		NAME		
STREET ADDRESS	4189 ORMOND ST		STREET ADDRESS		
CITY-ST-ZIP	ENGLEWOOD, FL 33948		CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WOOLEY, GEORGE		NAME	PRESIDENT	
STREET ADDRESS	12300 HERNANDO RD		STREET ADDRESS	1067 HUMBOLT ST.	
CITY-ST-ZIP	NORTH PORT, FL 34287		CITY-ST-ZIP	ENGLEWOOD, FL 34224	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEST, WINFRED		NAME	RIDER, HELEN + RICHARD	
STREET ADDRESS	1067 HUMBOLT ST		STREET ADDRESS	175 AVALON RD	
CITY-ST-ZIP	ENGLEWOOD, FL 34224		CITY-ST-ZIP	VENICE, FL 34293	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BERNARDO, EVELYN		NAME	TREASURER	
STREET ADDRESS	20 DEER LANE		STREET ADDRESS	INGELS, ANN + HOWARD	
CITY-ST-ZIP	ENGLEWOOD, FL 34223		CITY-ST-ZIP	1415 CORTES DRIVE	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	INGELS, ANN & HOWARD		NAME		
STREET ADDRESS	1415 CORTES DR		STREET ADDRESS		
CITY-ST-ZIP	ENGLEWOOD, FL 34223		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SHAW, MORRILL & E.		NAME	DIRECTOR	
STREET ADDRESS	8141 LANDINGS LANE		STREET ADDRESS	WOOLEY, GEORGE	
CITY-ST-ZIP	ENGLEWOOD, FL 34224		CITY-ST-ZIP	12300 HERNANDO RD	
				NORTH PORT FL 34287	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: ANN INGELS TREASURER			3/31/04 941-475-7536		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

94043692



Attachments ²⁴ 74/922

Officers

Presidents:

Winifred and Richard Best 475-2777

Vice Presidents:

Richard and Helen Rider 493-0366

Secretary:

Karin and Duane Hartline 697-9863 (Nov & Dec)
Ken and Carolyn Collins 766-7968 (Jan Thru Mar)

Treasurer Ann & Howard Ingles 475-7536

Directors

Sandy & Lee Shaw
Ann & Howard Ingles ^{INGLES}
Ken & Sandy Robinson
Wayne & Pat Barrup
George & Dot Wooley