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FILED

Mar 26 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 742536 (6)

1. Corporation Name

THE VICTOR E. CLUB, INC.

Principal Place of Business

1320 EAST NEW YORK AVENUE
DELAND FL 32724

Mailing Address

1320 EAST NEW YORK AVENUE
DELAND FL 32724-5707

3. Date Incorporated or Qualified

04/21/1978

3a. Date of Last Report

03/16/1996

4. FEI Number

59-2321100

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22. City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILSON, KEITH
1535 AMY CIRCLE
DELTONA FL 32738

81 Name

Wilson Keith

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

2465 Oxford Rd

83

84 City

Deland

FL

85 Zip Code

32724

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

3-20-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETETD
NAME LLOYD, MARY J
STREET ADDRESS 538 W. OHIO AVE.
CITY-ST-ZIP DELAND FL 327201.1 TITLE ☐ Change ☐ AdditionTD
1.2 NAME LLOYD, MARY J.
1.3 STREET ADDRESS 538 W. OHIO AVE.
1.4 CITY-ST-ZIP Deland FL 32720TITLE ☐ DELETEPD
NAME WILSON, KEITH
STREET ADDRESS 1535 AMY CIRCLE
CITY-ST-ZIP DELTONA FL 327382.1 TITLE ☒ Change ☐ AdditionPD
2.2 NAME Wilson Keith
2.3 STREET ADDRESS 2465 Oxford Rd
2.4 CITY-ST-ZIP Deland, FL 32724TITLE ☐ DELETEVPD
NAME O'BRYANT, JOHN
STREET ADDRESS 823 N. MAY ST.
CITY-ST-ZIP DELAND FL 327203.1 TITLE ☐ Change ☐ AdditionVPD
3.2 NAME O'Bryant, John
3.3 STREET ADDRESS 823 N. May St
3.4 CITY-ST-ZIP Deland, FL 32720TITLE ☐ DELETESD
NAME KASE, SUSAN
STREET ADDRESS 201 S. AMELIA APT. A2
CITY-ST-ZIP DELAND FL 327244.1 TITLE ☒ Change ☐ AdditionSD
4.2 NAME Kase, SUSAN
4.3 STREET ADDRESS 1126 W. Minnesota Ave
4.4 CITY-ST-ZIP Deland FL 32720TITLE ☐ DELETED
NAME BRATTY, BRUCE
STREET ADDRESS 114 A E. RICH AVE
CITY-ST-ZIP DELTONA FL 327245.1 TITLE ☐ Change ☐ AdditionD
5.2 NAME Bratty Bruce
5.3 STREET ADDRESS 245 S. Amelia Ave
5.4 CITY-ST-ZIP Deland FL 32724TITLE ☐ DELETED
NAME VACARRO, AUGIE
STREET ADDRESS 1417 DRYSDALE DR
CITY-ST-ZIP DELTONA FL6.1 TITLE ☒ Change ☐ AdditionD
6.2 NAME Harlan Frank
6.3 STREET ADDRESS 1145 Shady Oak Ln
6.4 CITY-ST-ZIP Deland FL 32720

14. I do 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:

Signature typed or printed name of signing officer or director

3-20-97

Date

Daytime Phone # 60135110

CR2E037 (9/96)