2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # 744175 1. Entity Name 02-07-2006 90030 016 ****61.25 PALATKA DUPLICATE BRIDGE CLUB, INCORPORATED Principal Place of Business Mailing Address 521 S 13TH STREET PALATKA FL 32177-5003 521 S 13TH STREET PALATKA FL 32177-5003 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2372699 Not Applicable Zip Country Zio \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MUSSOLINE, JOHN D. Street Address (P.O. Box Number is Not Acceptable) 501 ST. JOHNS AVE. PALATKA FL:32177 City Zip Code 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 (NOTE_Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to " \$5.00 May Be П Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Change Addition TUTEN, JO ANN DUTCHO/TZ NAME NAME 322 BLAIR DR. STREET ADDRESS STREET ADDRESS 10405 Baylor PALATKA FL 32177 CITY-ST-ZIP CITY-ST-ZIP VPD Delete TITLE TITLE Change Addition Joyce Bater MILLER, JOYCE NAME NAME 45 mission Rd STREET ADDRESS P.O. BOX 520 STREET ADDRESS CITY-ST-ZIE BOSTWICK FL 32007 CITY-ST-ZIP 32177 HILLE - Delete TITLE Change ☐ Addition TD MESSINA, JEAN STREET ADDRESS 134 HIAWATHA CT STREET ADDRESS EAST PALATKA FL 32131 CITY-ST-7IP CITY-ST-7IP Delete TITLE TITLE Change Addition Ruth Cunio DURCHHOLTZ, DONNA NAME NAME 54 MulhollANd PK. STREET ADDRESS 10405 BAYLOR AVENUE STREET ADDRESS CITY-ST-7(P HASTINGS FL 32145 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition D KICKLIGHTER, LOUISE NAME 121 ROUND LAKE ROAD #1 STREET ADDRESS STREET ADDRESS PALATKA FL 32177 CITY-ST-7/P CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition BAKER, JOYCE NAME NAME 405 MISSION ROAD STREET ADDRESS STREET ADDRESS PALATKA FL 32177 CITY-ST-ZIP CITY-ST-ZIP

FILED

Feb 07, 2006 8:00 am

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.

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information