## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

748120 DOCUMENT #
1. Corporation Name

(3)

LAKELA	ND COIN CLUB, INC.						
Principal Place	of Business	Mailing Address			# 160116 16019 DIOUR 19101 11016 1101	##   B:#	
3280 DOVE LANE P.O. BOX 2774 MULBERRY FL 33860		P.O. BOX 2774 P.O. BOX 2774 LAKELAND FL 33806		Date Incorporated or Qualified	3a. Date of Last Report		
U\$		US			07/19/1979	04/12/1995	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		59-2521738	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22		27			Fee Required		
City & State	<del>)</del>	Oty & State		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees		
Zip Country		Zip Country		This corporation has liability for			
24	25	29	30	,	Florida Stalutes	Yes X No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New	Registered Agent	
			81	Name			
HEARN, ALLEN			82	Street	ddress (P.O. Box Number is Not Acceptable)		
3280 DOVE LANE							
MULBER	RY FL 33860		83	3			
			84	3 City	- III MANAGE	85 Zip Code	
44.5		C17 1500 Flatida Otaba	too the above	nomed s	orporation submits this statement for the p	FL 03 2.p Good	
or register	ed agent, or both, in the State of Floric th, and accept the obligations of, Sect	da. Such change was authori ion 617.0503, Florida Statute	zed by the cor s.	poration's	s board of directors. Thereby accept the ap	pointment as registered agent. I am	
12.	OFFICERS AN		13.			HCERS AND DIRECTORS IN 12	
TIFLE	PD DELETE		1.1 TITLE			Change Addition	
NAME	HEARN, ALLEN		1.2 NAME				
S`REET ADDRESS	3280 DOVE LANE		1.3 STREE	et address			
CITY-ST-ZIP	MULBERRY FL		1 4 CITY -		ļ	Mohama (Table)	
TIFLE	NI MINDOUV I D	DELETE	2 1 T TLE		Vauna Filleen	🔀 Change 🔲 Addition	
NAME	Murphy, J. D 387706 Piedmont Ave		2.2 NAME	: FT ADDRESS	Young Eilleen N48 Village Cr., S. W	r.	
\$TREET ADDRESS	ZEPHYRHILLS FL				Winter Haven, FL	93880	
CITY-ST-ZIP TITLE	D	DELETE	2 4 CITY 3 1 TILLE		WINCEY HAVEN, FL	☐ Change ☐ Addition	
NAME	HOEFLE, B. J		3.2 NAME			2 • 1	
STREET ADDRESS	1406 CLARENDON AVE		33STRE	ET ADDRESS			
C TY-ST-ZiP	LAKELAND FL		3.4. CITY				
TITLE	S	<b>∑</b> DELETE	4.1 TITUE	-	Mc Cullough, Grac 607 E. Lowell St	Change Addition	
NAME	YOUNG, EILLEEN		4. 2 NAM	E	Me Collough, Grac	, e	
STREET ACORESS	448 VILLAGE CR., S.W.		4.3 STRE	ET ADDRESS	607 E. Lowell 30		
C-TY-ST-ZIP	WINTER HAVEN FL		4 4 City	-ST-ZIP	Lakeland, FL 3	3803	
TITLE	LIFOTED HAPPEY	DELETE	5 1 TIFLE		1	Change Addition	
NAME	HESTER, HARVEY		5.2 NAMI				
STREET ADDRESS	618 W PATTERSON AVE			ET ADDRESS			
C-TY - S1 - ZIF	LAKELAND FL	DELETE	5.4 CITY		<u> </u>	Change Addition	
TITLE	D Best, Carrie		6 1 TITLE			□ cuange □ nadition	
NAME STREET ADDRESS	1610 BIRCHWOOD LOOP		6.2 NAMI	e et address			
SINCEL ADDRESS	,		■ pasint	CENTON IN			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed or on an attachment with an address.

64 CITY - ST - ZIP

SIGNATURE: Harry 1. Planty Harry H. Hester, Jr. 3/18/96 (941)686-1857

LAKELAND FL

C-TY-ST-ZIP