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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

753882

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| ri corporation | 1 Mai 170 | • • | | | | | | |
|--|---|---------------------------------|-------------------------------------|---------------|---|---------------------------|------------------------|--|
| QUOTA CLUB OF JACKSONVILLE, INC. | | | | | O KARINI IRREK EKIRT ANSK IBIRI ARKIA | | 81811 81811 B1811 4881 | |
| | | | | | | | | |
| Principal Place of Business GO PEOPLE'S GAS TOTO PHILIPS HIGHWAY JACKSONVILLE FL 32207 TOTO PHILIPS HIGHWAY JACKSONVILLE FL 32207 TOTO PHILIPS HIGHWAY JACKSONVILLE FL 32207 | | | | | C SECULI LOGICI GUIDO INICI IGIDI SELICI | ider militä istinit menti | AIAIL AIAIL AIAIL FAAL | |
| C/O PEOPLE'S CAS 1419 S. Birmingham R.T. 1419 S. Birmingham R.T. 1419 S. Birmingham R.T. | | | | | | | | |
| TOUR PHILIPS HIGHWAY JACKSONNILLE FL 32207 TOURSONNILLE FL 32207 TOURSONNILLE FL 32207 | | | | | | | | |
| JACKSONVILL | | ACKSONVILLE FL 32207 | Toda | - | 3. Date incorporated or Qualified | 3a. Date of L | ast Report | |
| U S | 32207 4 | S | | | 08/26/1980 | | 1/1995 | |
| 2. Principal Pla | | Mailing Address | | | 4. FEI Number | 1 00,0 | Applied For | |
| 21 26 | | | | | 59-1700567 | F | Not Applicable | |
| Suite, Apt. #, etc Suite, Apt. #, etc. | | | | _ | 1 | _ \$8 | .75 Additional | |
| 22 1419 | S. Birminghan Rd27 | 1419 S.B | sirmingha | n Pe | 5. Certificate of Status Desired | | ee Required | |
| | | | | | 6. Election Campaign Financing | \$! | 5.00 May Be | |
| 23 Jacksonville FL 28 Jacksonv | | | wille b | | Trust Fund Contribution | ☐ A | dded to Fees | |
| Zip 32207 25 () SR 20 32207 20 | | | Country A | | 8. This corporation has liability for in | tangible tax und | er s. 199.032, | |
| | | | | | Florida Statutes | | | |
| | 9. Name and Address of Current Registe | ered Agent | 81 Name | | 10. Name and Address of New He | gisterea Agent | | |
| | | | of Name | | | | | |
| ARTHUR, TRACY K 1419 S. BIRMINGHAM RD JACKSONVILLE FL 32207 | | | 82 Street A | | | | | |
| | | | 83 | | | | | |
| | | | 63 | | | | | |
| | | | 84 City | | | FL 85 | Zip Code | |
| 44 6 | o the provisions of Sections 617.0502 and 617 | 1500 Florida Ctatutae the | about pared cor | a coroli | on submits this statement for the pure | | its registered office | |
| or registere | ed agent, or both, in the State of Florida Such | change was authorized by | the corporation's b | board i | of directors. I hereby accept the appoint | ntment as regist | ered agent. I am | |
| familiar witi | h, and accept the obligations of, Section 617.0 | 0503, Florida Statutes. | | | | | | |
| SIGNATURE _ | Signature, typed or printed name of registered agent and title if a | policable (NOTi: Rev | istered Agent signature re- | aured w | figurer istanne | DATE | | |
| 12. | OFFICERS AND DIRECT | | 13. | | ADDITIONS/CHANGES TO DEFI | | | |
| TITLE | PD | DELETE | 1.1 THILE | Sh | indy Plance Mr | | | |
| NAME | BLACKMER, ARLENE | ``\ | 1 2 NAME | VI- | 709 Joselyn Rocksonville FL | \ | | |
| STREET ADDRESS | 9765 SOUTHBROOK DR., #2711 | | 13 STREET ADDRESS | 77 | ICK SOMILLE EL | 3222 | < | |
| CITY-ST-ZIP | JACKSONVILLE FL | | 14 CITY - ST - ZIP | | 2012 | | | |
| TITLE | VPD | DELETE | 2 1 TITLE | | | ☐ Cha | nge 🔲 Addition | |
| NAME | JANES, JEANENE | | 2 2 NAME | | | | | |
| STREET ADDRESS | 4438 BREAKWATER ROW WEST | | 2.3 STREET ADDRESS | | | | | |
| CITY+ST-ZIP | JACKSONVILLE FL | | 2 4 CITY - ST - ZIP | | | | | |
| TITLE | VPD | DELETE | 3 1 TITLE | | | ☐ Cha | nge 🔲 Addition | |
| NAME | MILLER, GLORIA | | 3 2 NAME | | | | | |
| STREET ADDRESS | 4531 BIRCHWOOD AVENUE | 1 | 3 3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | JACKSONVILLE FL | Doctors | 3.4 City-St-ZiP | | | | 990 | |
| TITLE | SD | DELETE | 4.1 TITLE | | | Cha | nge 🔲 Addition | |
| NAME | ARTHUR, TRACY K | | 4. 2 NAME | | | | | |
| STREET ADDRESS | 1419 S. BIRMINGHAM RD | | 4 3 STREET ADDRESS | | | | | |
| CITY - ST - ZIP | JACKSONMLLE FL | DELETE | 4.4 CITY - ST - ZIP | ļ | | Cha | nge Addition | |
| TITLE | TD | Finerete | 5 1 TITLE | | | | ngo [] Addition | |
| NAME | ARTHUR, TRACY K | | 5 2 NAME | | | | | |
| STREET ADDRESS | 1419 S. BIRMINGHAM RD | į | 5.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | JACKSONVILLE FL | DELETE | 5 4 CITY - ST - ZIP 6 1 TITLE | | | Cha | inge 🔲 Addition | |
| TITLE | D MOLYNEAUY JAN | | 6 2 NAME | | | | | |
| NAME CYDECT ADDRESS | MOLYNEAUX, JAN | • | 6 3 STREET ADDRESS | | | | | |
| STREET ADDRESS | 6211 RIVER | | | | | | | |
| CITY-ST-ZIP | JACKSONVILLE FL by certify that the information supplied with the | filing is voluntarily furnished | 6.4 City-St-ZiP and does not qua | L dify for | the exemption stated in Section 119.0 | 7(3)(k), Florida S | Statutes. I further | |
| certify that the information indicated on this annual aport 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 of the receiver of trustee enipowers I to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed accorate attachment with an articles. | | | | | | | | |

SIGNATURE:

4/27/96 90429660