

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -2 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 760156 (0)

1. Corporation Name

CENTURY 21 SOCIAL AND SPORTS CLUB INC.

Principal Place of Business

Mailing Address

%ROBERT B. BURANDT
P. O. BOX 535
CAPE CORAL FL

%ROBERT B. BURANDT
P. O. BOX 535
CAPE CORAL FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/23/1981

3a. Date of Last Report

06/16/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BURANDT, ROBERT
1714 CAPE CORAL PARKWAY
CAPE CORAL FL 33904

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

BURDEN, RICHARD

STREET ADDRESS

358 APOLLO DRIVE

CITY-ST-ZIP

FT. MYERS FL 33908

TITLE

VP

NAME

MILLER, ROBERT

STREET ADDRESS

568 JUPITER DR

CITY-ST-ZIP

FT. MYERS FL 33908

TITLE

S

NAME

BURDEN, KAREN

STREET ADDRESS

358 APOLLO DR

CITY-ST-ZIP

FT. MYERS FL 33908

TITLE

T

NAME

EASLICK, GRACE

STREET ADDRESS

530 MARS DRIVE

CITY-ST-ZIP

FT. MYERS FL 33908

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P - D

☒ Change ☐ Addition

1.2 NAME

STIRES, WILLIAM C.

1.3 STREET ADDRESS

348 LUNAR DRIVE

1.4 CITY-ST-ZIP

FT. MYERS, FLORIDA 33908

2.1 TITLE

VP - D

☒ Change ☐ Addition

2.2 NAME

DOLEZAL, ROBERT

2.3 STREET ADDRESS

420 MERCURY WAY

2.4 CITY-ST-ZIP

FT. MYERS, FLORIDA 33908

3.1 TITLE

VP - D

☒ Change ☐ Addition

3.2 NAME

LUDWIG, BETTY

3.3 STREET ADDRESS

417 MERCURY WAY

3.4 CITY-ST-ZIP

FT. MYERS, FLORIDA 33908

4.1 TITLE

S - D

☒ Change ☐ Addition

4.2 NAME

PORTER, MARY JANE

4.3 STREET ADDRESS

361 APOLLO DRIVE

4.4 CITY-ST-ZIP

FT. MYERS, FLORIDA 33908

5.1 TITLE

T - D

☐ Change ☐ Addition

5.2 NAME

EASLICK, GRACE

5.3 STREET ADDRESS

530 MARS DRIVE

5.4 CITY-ST-ZIP

FT. MYERS, FLORIDA 33908

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 110.07(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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William C. Stires
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 14, 1995 813 466 5027
(Signature 1995)