

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 27 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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<b>DOCUMENT # 763891 (9)</b> 1. Corporation Name <b>LAKE WORTH VILLAGE COMMUNITY CLUB, INC.</b>
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Principal Place of Business <b>5180 LAKE WORTH ROAD LAKE WORTH FL 33463</b>	Mailing Address <b>5180 LAKE WORTH ROAD LAKE WORTH FL 33463</b>
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<b>21</b> 2. Principal Place of Business Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip Country	<b>2a.</b> Mailing Address Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip Country
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<b>3.</b> Date Incorporated or Qualified <b>06/23/1982</b>	
<b>4.</b> FEI Number <b>59-2241152</b>	Applied For Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>7.</b> Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>9. Name and Address of Current Registered Agent</b> <b>GUADYS, BARNER</b> <b>4155 CONRAD CIR</b> <b>LAKE WORTH FL 33463</b>
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<b>10. Name and Address of New Registered Agent</b> <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> Zip Code
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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 Gladys Barner (NOTE: Registered Agent signature required when reinstating) DATE 4/21/98

12. OFFICERS AND DIRECTORS	
TITLE <b>P</b> NAME <b>JOHN, CHRISTIE</b> STREET ADDRESS <b>4145 ROBERTS WAY</b> CITY-ST-ZIP <b>LAKE WORTH FL 33463</b>	<input type="checkbox"/> DELETE
TITLE <b>VP</b> NAME <b>FORTIER, ALFRED</b> STREET ADDRESS <b>4293 JANET DRIVE</b> CITY-ST-ZIP <b>LAKE WORTH FL 33463</b>	<input type="checkbox"/> DELETE
TITLE <b>S</b> NAME <b>BOHLMAN, SANDY</b> STREET ADDRESS <b>4190 CONRAD CIRCLE</b> CITY-ST-ZIP <b>LAKE WORTH FL 33463</b>	<input type="checkbox"/> DELETE
TITLE <b>D</b> NAME <b>PALMER, RUTH</b> STREET ADDRESS <b>4359 JANET DRIVE</b> CITY-ST-ZIP <b>LAKE WORTH FL 33463</b>	<input type="checkbox"/> DELETE
TITLE <b>T</b> NAME <b>BARNER, GLADYS</b> STREET ADDRESS <b>4155 CONRAD CIRCLE</b> CITY-ST-ZIP <b>LAKE WORTH FL 33463</b>	<input type="checkbox"/> DELETE
TITLE <b>D</b> NAME <b>JOHN, EWALD</b> STREET ADDRESS <b>5117 GINGER WAY</b> CITY-ST-ZIP <b>LAKE WORTH FL 33463</b>	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE <b>P</b> 1.2 NAME <b>Kaaren Johnston</b> 1.3 STREET ADDRESS <b>4227 Conrad Circle</b> 1.4 CITY-ST-ZIP <b>Lake Worth, FL 33463</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE <b>VP</b> 2.2 NAME <b>James Hood</b> 2.3 STREET ADDRESS <b>4348 Gretchen Place</b> 2.4 CITY-ST-ZIP <b>Lake Worth, FL 33463</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE <b>S</b> 3.2 NAME <b>Carol Mahoney</b> 3.3 STREET ADDRESS <b>4199 Conrad Circle</b> 3.4 CITY-ST-ZIP <b>Lake Worth, FL 33463</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE <b>D</b> 4.2 NAME <b>Julie Boutin</b> 4.3 STREET ADDRESS <b>4463 Dorothea Drive</b> 4.4 CITY-ST-ZIP <b>Lake Worth, FL 33463</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE <b>D</b> 6.2 NAME <b>Jean Hopson</b> 6.3 STREET ADDRESS <b>4303 Gretchen Place</b> 6.4 CITY-ST-ZIP <b>Lake Worth, FL 33463</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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: Jean Hopson DATE: 4/21/98

CP2E037 (10/97)