

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Sep 18 1997 8:00am  
Secretary of State

DOCUMENT # 766254 (7)

1. Corporation Name

EMPERIAL TWENTY-FIVE CLUB, INC.

Principal Place of Business

Mailing Address

1750 GIBBONS ST  
BARTOW FL 33830-6617

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BARTOW FL 33830-6617

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
12/22/1982

3a. Date of Last Report  
04/10/1996

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

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WATSON, GEORGE W.  
1750 GIBBONS STREET  
BARTOW FL 33830

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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V ☐ DELETE  
NAME ROBINSON, FLOYD  
STREET ADDRESS 806 S.E. FIFTH ST  
CITY-ST-ZIP MULBERRY FL

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE P ☐ DELETE  
NAME SMITH, BEN  
STREET ADDRESS 4911 84TH STREET SOUTH  
CITY-ST-ZIP TAMPA FL

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE SD ☐ DELETE  
NAME WYNN, RALPH  
STREET ADDRESS 1070 E. TEE CIRCLE  
CITY-ST-ZIP BARTOW FL

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE MBD ☐ DELETE  
NAME COLLINS, GEORGE  
STREET ADDRESS P O BOX 1272  
CITY-ST-ZIP BARTOW FL

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE TD ☐ DELETE  
NAME BOSTON, LOUIS  
STREET ADDRESS 132 GRANT ST  
CITY-ST-ZIP LAKE WALES FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE FS ☐ DELETE  
NAME WATSON, GEROGE W  
STREET ADDRESS 1750 GIBBONS ST  
CITY-ST-ZIP BARTOW FL

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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

Handwritten signature: George W. Watson

Handwritten date: 9/14/97

CR2E037 (4/97)