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

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 16 PM 3:15

DOCUMENT # 767307 (2)

1. Corporation Name

YUGOSLAV-AMERICAN SOCIAL CLUB, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 10116 HEATHCLIFF ST<br>P.O. BOX 3502<br>SPRING HILL FL 34606 | 10116 HEATHCLIFF ST<br>P.O. BOX 3502<br>SPRING HILL FL 34606 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/04/1983
3a. Date of Last Report: 04/15/1994
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. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 | City & State 28 |
| Zip 24 / Country 25 | Zip 29 / Country 30 |

**9. Name and Address of Current Registered Agent**

MRZLOCK, LOTTIE
10116 HEATHCLIFF ST.
SPRING HILL FL 34608

**10. Name and Address of New Registered Agent**

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 _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (FOR Registered Agent signature required when mailed)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | P | 11 TITLE | ☐ Change ☐ Addition |
| NAME | LEE, WITT | 12 NAME | |
| STREET ADDRESS | PO BOX 5712/NA | 13 STREET ADDRESS | |
| CITY-ST-ZIP | BAYONET POINT FL | 14 CITY-ST-ZIP | |
| TITLE | V | 21 TITLE | ☐ Change ☐ Addition |
| NAME | ROBERTS, JEAN | 22 NAME | |
| STREET ADDRESS | 7537 JASMINE BLVD | 23 STREET ADDRESS | |
| CITY-ST-ZIP | PORT RICHEY FL | 24 CITY-ST-ZIP | |
| TITLE | S | 31 TITLE | ☒ Change ☐ Addition |
| NAME | YOUNG, FRANCES | 32 NAME | S - Catherine Durkee |
| STREET ADDRESS | 1162 CONCORD AVE | 33 STREET ADDRESS | 5443 Pasadena Dr. |
| CITY-ST-ZIP | SPRING HILL FL | 34 CITY-ST-ZIP | New Port Richey, FL 34652 |
| TITLE | D | 41 TITLE | ☐ Change ☐ Addition |
| NAME | SKIBOLA, IVAN | 42 NAME | |
| STREET ADDRESS | 5815 BANTAM AVE. | 43 STREET ADDRESS | |
| CITY-ST-ZIP | NEW PORT RICHEY FL | 44 CITY-ST-ZIP | |
| TITLE | D | 51 TITLE | ☒ Change ☐ Addition |
| NAME | RATKOVICH, HELEN | 52 NAME | D - John Fedyshin |
| STREET ADDRESS | 9584 RIVER RD | 53 STREET ADDRESS | 4972 Bay Ridge Ct. |
| CITY-ST-ZIP | SPRING HILL FL | 54 CITY-ST-ZIP | Spring Hill, FL 34606 |
| TITLE | D | 61 TITLE | ☐ Change ☐ Addition |
| NAME | VOKOTY, TONY | 62 NAME | |
| STREET ADDRESS | 5600 VIRGINIA AVE | 63 STREET ADDRESS | |
| CITY-ST-ZIP | NEW PORT RICHEY FL | 64 CITY-ST-ZIP | |

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)(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:** L Witt G. Witt — Feb. 12th 1995 — 1-813 863-1064
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0005031