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Apr 04 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 768835 (1)

1. Corporation Name

POINSETTIA PARK SOCIAL CLUB, INC.



Principal Place of Business

4701 BALLARD RD LOT 53
FORT MYERS FL 33905

Mailing Address

GERBER ELEANOR
151 SIESTA LN
FT MYERS FL 33905-4352
US

3. Date Incorporated or Qualified
06/09/1983

3a. Date of Last Report
04/16/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 DORIS I LLOYD
Suite, Apt. #, etc.
27 201 DOMINGO DRIVE

23 City & State

28 FT MYERS FL 33905-4352

24 Zip

Country

29 Zip

Country

25

30

US

4. FEI Number
59-2432737

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GERBER, ELEANOR
151 SIESTA LN
FT MYERS FL 33905

10. Name and Address of New Registered Agent

81 Name LLOYD DORIS I.
82 Street Address (P.O. Box Number is Not Acceptable)
201 DOMINGO DRIVE
83
84 City FT MYERS FL 85 Zip Code 33905

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 of 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 *Doris I Lloyd* *Treasurer* *Mar 25/97*
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	SULLIVAN, IRENE	
STREET ADDRESS	268 POINSETTIA DR	
CITY-ST-ZIP	FT MYERS FL	
TITLE	VD	☒ DELETE
NAME	PIZZUTO, JOHN	
STREET ADDRESS	219 N POINSETTIA DR	
CITY-ST-ZIP	FT MYERS FL	
TITLE	SD	☒ DELETE
NAME	GABISCH, MARY	
STREET ADDRESS	150 SIESTA LN	
CITY-ST-ZIP	FT MYERS FL	
TITLE	TD	☒ DELETE
NAME	GERBER, ELENOR	
STREET ADDRESS	151 SIESTA LN	
CITY-ST-ZIP	FT MYERS FL	
TITLE	D	☒ DELETE
NAME	BEYAK, MARY	
STREET ADDRESS	41 POINSETTIA DR	
CITY-ST-ZIP	FT MYERS FL	
TITLE	D	☐ DELETE
NAME	BUONOPANE, PHYLLIS	
STREET ADDRESS	202 DOMINGO DR	
CITY-ST-ZIP	FT MYERS FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	PIZZUTO JOHN	
1.3 STREET ADDRESS	219 N POINSETTIA DR	
1.4 CITY-ST-ZIP	FT MYERS	
2.1 TITLE	PD	☒ Change ☐ Addition
2.2 NAME	FOSS KUNICE	
2.3 STREET ADDRESS	83 E POINSETTIA DR.	
2.4 CITY-ST-ZIP	FT MYERS	
3.1 TITLE	SD	☒ Change ☐ Addition
3.2 NAME	GRIFFIN DORIS	
3.3 STREET ADDRESS	199 DOMINGO DR	
3.4 CITY-ST-ZIP	FT MYERS	
4.1 TITLE	TD	☒ Change ☐ Addition
4.2 NAME	LLOYD DORIS	
4.3 STREET ADDRESS	201 DOMINGO DR.	
4.4 CITY-ST-ZIP	FT MYERS	
5.1 TITLE	D	☒ Change ☐ Addition
5.2 NAME	BRINKMAN FLORENCE	
5.3 STREET ADDRESS	277 W POINSETTIA DR	
5.4 CITY-ST-ZIP	FT MYERS	
6.1 TITLE	D	☐ Change ☐ Addition
6.2 NAME	BUONOPANE PHYLLIS	
6.3 STREET ADDRESS	202 DOMINGO DRIVE	
6.4 CITY-ST-ZIP	FT MYERS	

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: *Doris I Lloyd* *3/10* *941 693-2497*

CR2E037 (9/96)