FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F43377

(3)

CLUBHOUSE PUBLISHING, INC.

Principal Place of Business Mailing Address									P. W. I. W. I. I. I. I.	. 5-21, (55:	
601 SOUTH OSI		P.O. BOX 0012	801 SOUTH OSPREY AVENUE R.O. BOX 6812 SARASOTA FL 34230-3212								
SARASOTA FL 34280 - 34236			34236				3. Date Incorporated or Qualified 09/03/1981		ate of Last 6	Report	
2. Principal Pr	lace of Business	2a. Mailing Ac	ddress				4. FEI Number			Applied For	
21		26					59-2124188		N	ot Applicable	
Suite, Apt	#, etc	Suite, Apt.	#, etc.	T			5. Certificate of Status Desired		- - · · ·	Additional	
22		27					5. Certificate of Olatos Desired		Fee R	Required	
City & State	e	ê '	City & State				6. Election Campaign Financing \$5.00 May Be				
23		[28]	4				Trust Fund Contribution			to Fees	
Zip	Country	Zip		Country 30			8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes Yes No				
24	25 29 30 9. Name and Address of Current Registered Agent		L			10. Name and Address of New Registered Agent					
DEAR				81	Nam	ie		-		m	
DEAN, JIMMY 601 S OSPREY AVE						(1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.					
	ASOTA FL 34230		82 Street Ac			et Addre	Idress (P.O. Box Number is Not Acceptable)				
SAID	AGOTA TE GYEGO			B3							
				84	City	 		FL	85 Zip	Code	
11 Purcuant	to the providing of Sections 607.05	502 and 607 1508 £I	nrida Statutes	the above	a-nam	ed corno	ration submits this statement for the		of changing	its registered	
office or r	registered agent, or both in the State	te of Florida Such ch	ange was auth	orized by	the c	orporatio	ration submits this statement for the on's board of directors. I hereby acc	ept the ap	pointment a	s registered	
	rn familiar with and accept the obli				3.			4-16	-9-		
SIGNATURE.	Signature, typed or printed name of registered a	J/MM1	(NOTE: Re		nt signa	ure required	1 when reinstating)	DATE			
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFF	CERS AN	D DIRECTO	RS IN 12	
TITLE	DPT		DELETE	1.1 THILE					Change	Addition	
NAME	DEAN, JIMMY		1	1.2 NAME							
STREET ADDRESS	601 SOUTH OSPREY AVE			1.3 STREET	ADDRES	s					
CITY-ST ZIP	SARASOTA FL			1.4 CITY - S	T-ZIP						
TITLE	DS		DELETE	2.1 TITLE					☐ Change	☐ Addition	
NAME	DANIEL, PAMELA V.	_		2.2 NAME							
STREET ADDRESS	601 SOUTH OSPREY AVENU	E		2.3 STREET	ADDRES	s					
CITY+ST-ZIP	SARASOTA FL			2 4 CITY-5	T-ZIP	_	· · · · · · · · · · · · · · · · · · ·				
TITLE	C DENTON DANIES I		DELETE	3.1 TITLE					Change	Addition	
NAMÉ	DENTON, DANIEL J			3.2 NAME							
STREET ADDRESS	601 SOUTH OSPREY AVE			3.3 STAEET		S					
CHTY - ST - 7/P	SARASOTA FL		DELETE	3.4. CITY - 1	37-21P				Change	Addition	
TITLE			ייייייייייייייייייייייייייייייייייייייי	4.1 TITLE					FTI CHANGE		
NAMÉ				4. 2 NAME	100000	_ ا					
STREET ADDRESS				4.3 STREET		°					
CHIY+ST+ZIP TITLE			DELETE	4.4 CITY - S 5.1 TITLE	1-212	_			Change	Addition	
NAME		L	OLCUIC.	5.2 NAME					vg	The state of the s	
STREET ADDRESS				5.3 STREET	AMARES						
CITY - ST- ZIP				54 CITY - S		Ĭ					
TITLE			DELETE	61 TITLE		1			☐ Change	Addition	
NAME				62 NAME							
STREET ADDRESS				6.3 STREET	ADDAES	s					
CITY-\$1-7IP				6.4 CITY-S							
14. I do here!	by certify that the information suppl	nd with this filing do	es not qualify fo	or the exe	mptio	stated	in Section 119.07(3)(i), Florida Statu	tes. I furthe	er certify tha	it the	
Lam an o	ifficer or director of the corporation :	or the receiver or trus	stee empowere	d to exec	rate sute th	ina mat r is report	ny signature shall have the same leg as required by Chapter 607, Florida	Statutes;	and that my	nuer oain; mat name	
appears i	in Block 12 or Block 13 if charo 4.	or on an attachment	with an addres	5 .							

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-9-

941-366-8225

Daylime Phone

FILED

Apr 22 1997 8:00am

Secretary of State

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