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

PROFIT Apr 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J58273 (O) THE PIER CLUB, INC. Principal Place of Business Mailing Address 1690 \$ CONGRESS AVE. STE 200 1690 S CONGRESS AVE. STE 200 DO NOT WRITE IN THIS SPACE **DELRAY BEACH FL 33445** DELRAY BEACH FL 33445 3. Date Incorporated or Qualified <u>02/23/1987</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2782368 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 - NUNCZ. ANTONIO Pivinski, Joseph
Street Address (P.O. Box Number is Not Acceptable) 1690 S CONGRESS AVE. STE 200 82 **DELRAY BEACH FL 33445** 83 84 City 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. Joseph Pivinski, Vice Pres. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD DELETE Z Addition 1.1 TITLE ☐ Change V/T NAME LEVY, RICHARD D. 1.2 NAME PIVINSKI, JOSEPH 1690 S CONGRESS AVE 200 STREET ADDRESS 1.3 STREET ADDRESS 1690 S. Congress Avenue, Delray Beach, FL 33445 **DELRAY BEACH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME LEVY. MARK A. 2.2 NAME STREET ADDRESS 1690 S CONGRESS AVE 200 2.3 STREET ADDRESS **DE**LRAY BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME HUBSHMAN, E. E. 3.2 NAME STREET ADDRESS 1690 S CONGRESS AVE 200 3.3 STREET ADDRESS CITY-ST-ZIP <u>De</u>lray beach fl 3.4. CITY - ST- ZIP DELETE TITLE Change 4.1 DTLE Addition MAME **NUNEZ, ANTONIO** 4. 2 NAME STREET ADDRESS 1690 S CONGRESS AVE 200 4.3 STREET ADDRESS **DELRAY BEACH FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change ☐ Addition NAME LEVY, HARRY A. 5.2 NAME STREET ADDRESS **1690 S CONGRESS AVE 200 5.3 STREET ADDRESS DELRAY BEACH FL** CITY-ST-ZIP 5.4 CiTY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- ZIP 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED