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

APPROVED AND FILED
95 APR 26 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N10901 (9)

1. Corporation Name
DELTONA ALL-STATES SHRINE CLUB, INC.

Principal Place of Business	Mailing Address
1065 MAYFLOWER AVNEUE P.O.BOX 5326 DELTONA FL 32728	1065 MAYFLOWER AVNEUE P.O.BOX 5326 DELTONA FL 32728

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/29/1985
3a. Date of Last Report: 04/12/1994
4. FEI Number: 23-7357956 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 1959 S. VISCAYA CIR	26 1959 S. VISCAYA CIR
Suite, Apt. #, etc. 22 P.O. Box 5326	Suite, Apt. #, etc. 27 P.O. BOX 5326
City & State 23 DELTONA, FL.	City & State 28 DELTONA, FL.
Zip / Country 24 32728 / 25 USA	Zip / Country 29 32728 / 30 USA

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
THOMPSON, RAYMOND B. 1065 MAYFLOWER AVENUE DELTONA FL 32728	81 Name: ROBARDS, JAMES C. 82 Street Address (P.O. Box Number is Not Acceptable): 2860 VALLEY FORGE RD 83 84 City: DELAND FL 85 Zip Code: 32720

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: JAMES C ROBARDS — James C. Robards — 4/20/'95
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	P	1.1 TITLE	P	☒ Change ☐ Addition
NAME	FORTNER, EUGENE	1.2 NAME	HERNDON, WILLIAM	
STREET ADDRESS	1090 BRADDOCK STREET	1.3 STREET ADDRESS	1898 VIKING AVE	
CITY-ST-ZIP	ENTERPRISE FL	1.4 CITY-ST-ZIP	DELTONA, FL. 32725	
TITLE	VP	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	HERNDON, WILLIAM	2.2 NAME	IRVING, HARRY	
STREET ADDRESS	1898 VIKING AVE	2.3 STREET ADDRESS	1959 S. VISCAYA CIR	
CITY-ST-ZIP	DELTONA FL	2.4 CITY-ST-ZIP	DELTONA, FL 32738	
TITLE	VP	3.1 TITLE	VP	☒ Change ☐ Addition
NAME	SAAS, ROBERT	3.2 NAME	EBERT, ARTHUR	
STREET ADDRESS	735 FRUITLAND ST	3.3 STREET ADDRESS	960 DELTONA BLVD	
CITY-ST-ZIP	DELTONA FL	3.4 CITY-ST-ZIP	DELTONA, FL 32725	
TITLE	SD	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	IRVING, HARRY	4.2 NAME	ROBARDS, JAMES C.	
STREET ADDRESS	1959 S VISCAYA CIR	4.3 STREET ADDRESS	2860 VALLEY FORGE RD	
CITY-ST-ZIP	DELTONA FL	4.4 CITY-ST-ZIP	DELAND, FL 32720	
TITLE	TD	5.1 TITLE		☐ Change ☐ Addition
NAME	BELT, VERLAND	5.2 NAME		
STREET ADDRESS	2025 KELSO DR	5.3 STREET ADDRESS		
CITY-ST-ZIP	DELTONA FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	POWERS, ALBERT	6.2 NAME		
STREET ADDRESS	1317 PRAIRE CIRCLE	6.3 STREET ADDRESS		
CITY-ST-ZIP	DELTONA FL	6.4 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: HARRY IRVING — Harry Irving — 4/15/95 — 407-574-6457
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

003145

Mpas (

	#12	#13 X CHANGE
TITLE	D	D
NAME	THOMPSON, RAYMOND	WHITNEY, WILLARD
STREET	1065 MAYFLOWER ST	371 MAGNOLIA PL
CITY/ST/ZIP	DELTONA, FL 32725	DE BARY, FL 32713

TITLE	D	D X CHANGE
NAME	ROBARDS JAMES	FORTNER, EUGENE
STREET	2860 VALLEY FORGE RD	1090 BRADDOCK ST
CITY/ZIP	DELAND, FL 32720	ENTERPRISE, FL 32725