

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

DOCUMENT # N12735 (9)

1. Corporation Name

EUSTIS ALL STATES' CLUB, INC.

FILED
95 FEB 17 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
301 WEST WARD
EUSTIS FL 32726-4033

3. Date Incorporated or Qualified 12/23/1985
3a. Date of Last Report 02/28/1994
4. FEI Number 59-2669967
Applied For
Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country

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

DEERING, HELEN
1559 LAKESHORE DRIVE
EUSTIS FL 32726

10. Name and Address of New Registered Agent

81 Name BAKER, JAMES
82 Street Address (P.O. Box Number is Not Acceptable) 570 W. DEVAULT ST.
83
84 City UMATILLA FL 85 Zip Code 32784

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 A BAKER TREAS. Feb. 11, 1995
NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	DEERING, CHESTER
STREET ADDRESS	1559 LAKESHORE DR
CITY-ST-ZIP	EUSTIS FL
TITLE	D
NAME	HOVEY, ILENE
STREET ADDRESS	58 SHARP CIRCLE
CITY-ST-ZIP	EUSTIS FL
TITLE	D
NAME	HOPKIN, MCGREW
STREET ADDRESS	1117 DORIS AVENUE
CITY-ST-ZIP	TAVERES FL
TITLE	S
NAME	ZELINKA, ISABELLE
STREET ADDRESS	84 SHARP CIRCLE
CITY-ST-ZIP	EUSTIS FL
TITLE	D
NAME	BAKER, JAMES
STREET ADDRESS	WEST DEVAULT ST
CITY-ST-ZIP	UMATILLA FL
TITLE	T
NAME	DEERING, HELEN
STREET ADDRESS	1559 LAKESHORE DR
CITY-ST-ZIP	EUSTIS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRES.	☒ Change ☐ Addition
1.2 NAME	DENIES, CHARLES	
1.3 STREET ADDRESS	605 N HAWLEY	
1.4 CITY-ST-ZIP	EUSTIS FL 32726	
2.1 TITLE	DIRECTOR	☐ Change ☐ Addition
2.2 NAME	HOVEY, ILENE	
2.3 STREET ADDRESS	58 SHARP CIRCLE	
2.4 CITY-ST-ZIP	EUSTIS FL 32726	
3.1 TITLE	DIRECTOR	☒ Change ☐ Addition
3.2 NAME	DEERING, CHESTER	
3.3 STREET ADDRESS	1559 LAKESHORE DR	
3.4 CITY-ST-ZIP	EUSTIS FL 32726	
4.1 TITLE	DIRECTOR	☒ Change ☐ Addition
4.2 NAME	EMRICH, JACOB	
4.3 STREET ADDRESS	27 SHARP CIRCLE	
4.4 CITY-ST-ZIP	EUSTIS FL 32726	
5.1 TITLE	SECRETARY	☒ Change ☐ Addition
5.2 NAME	ALICE SULLIVAN	
5.3 STREET ADDRESS	304 W. KIVARD FOX RUN	
5.4 CITY-ST-ZIP	TAVERES, FL 32778	
6.1 TITLE	TREASURER	☒ Change ☐ Addition
6.2 NAME	BAKER, JAMES	
6.3 STREET ADDRESS	570 W. DEVAULT ST.	
6.4 CITY-ST-ZIP	UMATILLA FL 32784	

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 110.07(3)(k), 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: JAMES A BAKER Feb. 11, 1995 994-169-5864
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR