

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N12735 (9)

1. Corporation Name

EUSTIS ALL STATES' CLUB, INC.



Principal Place of Business

301 WEST WARD
EUSTIS FL 32726-4033

Mailing Address

~~301 WEST WARD~~
~~EUSTIS FL 32726-4033~~
204 SHARPS CIRCLE
EUSTIS, FL, 32726

3. Date Incorporated or Qualified
12/23/1985

3a. Date of Last Report
02/17/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

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30

4. FEI Number

59-2669967

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

BAKER, JAMES
570 W. DEVAULT ST.
UMATILLA FL 32784

10. Name and Address of New Registered Agent

81 Name

BRINGMAN, SARAH

82 Street Address (P.O. Box Number is Not Acceptable)

204 SHARPS CIRCLE

83

84 City

EUSTIS

FL

85 Zip Code

32726

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 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 617.0503, Florida Statutes.

SIGNATURE

Sarah D. Bringman

4/5/96

Signature, typed or printed name of registered agent and type applicable

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **DENIES, CHARLES**
STREET ADDRESS **605 N. HAWLEY**
CITY-ST-ZIP **EUSTIS FL**

TITLE **D P** ☐ DELETE
NAME **HOVEY, ILENE**
STREET ADDRESS **58 SHARP CIRCLE**
CITY-ST-ZIP **EUSTIS FL**

TITLE **D** ☐ DELETE
NAME **DEERING, CHESTER**
STREET ADDRESS **1559 LAKE SHORE DR.**
CITY-ST-ZIP **EUSTIS FL**

TITLE **D** ☐ DELETE
NAME **EMRICH, JACOB**
STREET ADDRESS **27 SHARP CIRCLE**
CITY-ST-ZIP **EUSTIS FL**

TITLE **S** ☒ DELETE
NAME **SULLIVAN, ALICE**
STREET ADDRESS **304 WEKIVARD FOX RD**
CITY-ST-ZIP **TAVARES FL**

TITLE **T** ☒ DELETE
NAME **BAKER, JAMES**
STREET ADDRESS **570 WEST DEVAULT ST**
CITY-ST-ZIP **UMATILLA FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **HOVEY ILENE**
1.3 STREET ADDRESS **58 SHARP CIRCLE**
1.4 CITY-ST-ZIP **EUSTIS, FL**

2.1 TITLE **D** ☒ Change ☐ Addition
2.2 NAME **DENIES, CHARLES**
2.3 STREET ADDRESS **605 N HAWLEY ST**
2.4 CITY-ST-ZIP **EUSTIS**

3.1 TITLE **D** ☐ Change ☐ Addition
3.2 NAME **DEERING, CHESTER**
3.3 STREET ADDRESS **1559 LAKE SHORE DR**
3.4 CITY-ST-ZIP **EUSTIS FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE **SMITH, FORD RUTH** ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS **22 SHARPS CIRCLE**
5.4 CITY-ST-ZIP **EUSTIS, FL 32726**

6.1 TITLE **TSARAH, BRINGMAN, SARAH** ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS **204 SHARPS CIRCLE**
6.4 CITY-ST-ZIP **EUSTIS, FL 32726**

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)(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

JAMES A. BAKER

3/11/96

323-4942

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)