

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90020 001 ****61.25

DOCUMENT # N14155

1. Corporation Name

10-13 CLUBS OF AMERICA, INC.

Principal Place of Business

TOOLEY, FRANK
4411 COCONUT CREEK BLVD
COCONUT CREEK FL 33066
US

Mailing Address

TOOLEY, FRANK
4411 COCONUT CREEK BLVD
COCONUT CREEK FL 33066
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip **25** Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip **30** Country

3. Date Incorporated or Qualified

04/02/1986

4. FEI Number
59-0247526

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

9. Name and Address of Current Registered Agent

TOOLEY, FRANK
4411 COCONUT CREEK BLVD
COCONUT CREEK FL 33066

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **LAPP, RICHARD**
STREET ADDRESS **1268 NW 112 WAY**
CITY-ST-ZIP **CORAL SPRINGS FL**

TITLE **D** ☐ DELETE
NAME **LEONARD LETIZIA**
STREET ADDRESS **14153 SCRUB OAK LN**
CITY-ST-ZIP **BROOKSVILLE FL 34613**

TITLE **TD** ☐ DELETE
NAME **TOOLEY, FRANK**
STREET ADDRESS **4411 COCONUT CREEK BV**
CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE **DC** ☐ DELETE
NAME **CARROLL, RICHARD**
STREET ADDRESS **822 SO OAKCREST PATH**
CITY-ST-ZIP **LECANTO FL**

TITLE **D** ☐ DELETE
NAME **CODY, JOHN**
STREET ADDRESS **3620 BLUEBELL LANE**
CITY-ST-ZIP **HOLIDAY FL**

TITLE **D** ☒ DELETE
NAME **CONDON, WILLIAM**
STREET ADDRESS **PO BOX 3739 N/A**
CITY-ST-ZIP **PT CHARLOTTE FL 33949**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D.** ☒ Change ☐ Addition
1.2 NAME **ROTHSCHILD THEODORE**
1.3 STREET ADDRESS **650 SNUG HARBOR DRIVE**
1.4 CITY-ST-ZIP **BEYNTON BEACH FL-33435**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE **D.** ☒ Change ☐ Addition
6.2 NAME **MONTELEONE, Joseph E.**
6.3 STREET ADDRESS **3321 White Ibis Ct #B1**
6.4 CITY-ST-ZIP **Punta Gorda FL 33950**

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Frank Tooley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/99 934 971 5983

Date

Daytime Phone #

CR2E037 (1/98)