FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # N15787

(7)

GLENDALE SPORTSMEN'S CLUB, INC.

Principal Place of Business Mailing Address						(1001 E1614 B1814 B1814 B1814	
% LAMAR BRYAN % LAMAR BRYAN 669 BROOKHAVEN WAY NICEVILLE FL 32578 NICEVILLE FL 32578		Y					
US		US			3. Date Incorporated or Qualified 07/10/1986	3a. Date of Last 04/28/1	
Principal Place of Business 1		2a. Mailing Address			4. FEI Number 59-2871258		Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					Not Applicable 5 Additional
City & State		27 City & State		5. Certificate of Status Desired	I	Required	
23		28		Election Campaign Financing Trust Fund Contribution	1 1	00 May Be ed to Fees	
Ζιρ 24	Country 25				8. This corporation has liability for intangible tax under s. 199.032,		
9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent			
81 Name							
BRYAN, LAMAR				Same"			
669 BROOKHAVEN WAY			82	Street Add	iress (P.O. Box Number is Not Accepta	DI(e)	
NICEVILI	LE FL 32578		83				
			84	City		FL 85 Zi	ip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the or registered agent, or both, in the State of Florida. Such charge was a United Statutes by familiar with and accept the obligations of Section 817.0503. Florida Statutes by				named corpo	ration submits this statement for the pu		registered office
l o rogisto	red agent, or both, in the State of Flori th, and accept the obligations of, Sec	iua. Ouch charige was authoriz	ea ov me com	oration's boa	ard of directors. I hereby accept the app	xintment as registered	d agent. I am
SIGNATURE							
12.		ID DIRECTORS	13.	ir eičustore rednike	ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTO	ORS IN 12
TITLE	P	DELETE	1.1 TITLE		/	☐ Change	Addition
NAME	TACHELS, JAMES B.—	<i>/</i> \	1.2 NAME				A
STREET ADDRESS	AT: 9 BOX 58		1.3 STREET	ADDRESS 4	like Newborn 71 Howard Jones Re	d.	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL-		1.4 CITY - S	T-ZiP	e Funiar Spgs. F	4. 32433	
TITLE	- ₩-	DELETE	2.1 TITLE		0	Change Change	Addition
NAME	HERRING, RONALD		2.2 NAME	'	0 01	• •	
STREET ADDRESS	-RT: 2, BOX 587-B		2.3 STREET	ADDRESS 2	192 Brown Rd		
C-TY-ST-ZiP	DEFUNIAK SPRINGS FL		2. 4 CiTY-5	ST - ZIP			
TITLE	-S	DELETE	3.1 TITLE			☐ Change	Addition
NAME	PETERS, JOHN D.	· •	3.2 NAME	1	avid Herring 192 Brown Rd.		
STREET ADDRESS	- rt. 3 box 56-p* - defuniak springs-f l		3.3 STREET	ADDRESS 2	172 Drown RA.		
CHTY-ST-ZIP TITLE	-B-	DELETE	3.4. CITY-5	ST-ZIP D	etuniak, Spas FL	. 32433	
NAME	-SHAW, ROBERT-L	A DELEGE	4.1 TITLE		eFuniak, Spes Flurgie Bryan	LI Change	Addition
STREET ADDRESS	RT. 3, BOX 31"		4. 2 NAME				
CITY - ST - ZIP	DEFLINIAK SPRINGS FL.		4.3 STREET		79 Price Rd.	-/ 22.122	
TITLE	—B-	D 20ELETE	4.4 CITY - S 5.1 TITLE	1-219	efuniak Spys, F	<u>7.32433</u> □Change	NZIddition
NAME	NELSON, HENRY	X Detter	5.1 HILE 5.2 NAME		lumnic lalatenal	<u> </u>	Addition
STREET ADDRESS	RT. 4, BOX 154		5.3 STREET	ADDRESS	Brown Rd.	Change	
CITY-ST-ZIP	DEFUNIAK SPRINGS EL		5.4 CITY-S	T. 7IP	urris Watson Brown Rd. e Funiak Spgs.,	E/ 2242	,
TITLE	ST	DELETE	6.1 TITLE	1-21F D	er word it spigs.	<u> </u>	Addition
NAME	BRYAN, LAMAR	_	6.2 NAME			L. Conside	L
STREET ADDRESS	669 BROOKHAVEN WAY		6.3 STREET	ADORESS			
CITY-ST-ZIP	NICEVILLE FL		6.4 CITY-S				
		with this filing is voluntarily form			for the exemption stated in Castion 110	07(0)(L) Flacial Otal	400 16 mb

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.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING SPECTOR

Date

Determine Those Printed Name of Signing Species on Director

SIGNATURE: ___