## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

N15787

GLENDALE SPORTSMEN'S CLUB, INC.

									41EH 21EH 1311
Principal Place of Business Mailing Address						f inditien bat traft meine imbet intel.	1001 #1811 0	7871 PIRIT E1511 I	Diate milit jane
% LAMAR BRYAN % LAMAR BRYAN						}			
669 BROOKHA		669 BROOKHAVEN WAY	WAY						
NICEVILLE FL	NICEVILLE FL 32578-4044				n Catalana Catalana	Ta- 6	-111		
U\$		US				3. Date incorporated or Qualified 07/10/1986	01/24/11	ate of Last Report 01/24/1996	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		A	pplied For
11		26				59-2871258		. N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	X		Additional equired
City & State	e	City & State		_		6. Election Campaign Financing		\$5.00	May Be
3		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Count	ry		8. This corporation has liability for	ntangibk	tax under a	. 199.032.
4	25	29	30				Yes		,
<u>-1</u>	9. Name and Address of Cu					10. Name and Address of New Re	gistered	Agent	
			8	1	Name				
BOWAN	141140			┙					
BRYAN, LAMAR			8	2	Street Addre	ess (P.O. Box Number is Not Acceptat	ile)		
669 BROOKHAVEN WAY			8	+					
NICEVIL	LE FL 32578		°	٦					
			8	4	City		FL	85 Zip	Code
4.4 Disease	to the previous of Continue 617	DED2 and C17 1500 Florido Statut				oration submits this statement for the pon's board of directors. I hereby accept			to contains
SIGNATURE	Signature, typed or printed name of registere	ed agent and title if applicable. (NO	TE: Registered A			ed when reinstating)	DATE		
12.		AND DIRECTORS	13,		<del></del>	ADDITIONS/CHANGES TO OFFIC	ERS AN		
TITLE	٧	, DELETE	1.1 TITLE	E				Change	Additio
NAME	NEWBORN, MIKE		1.2 NAM	E					
STREET ADDRESS	471 HOWARD JONES RD	).	1.3 STRE	EY /	ADDRESS				
CITY-ST-ZIP	DEFUNIAK SPRINGS FL		1.4 CITY	-ST	[-ZIP				
TITLE	P	☐ DELETE	2.1 TITLE	Ē				☐ Change	Additio
NAME	HERRING, RONALD		2.2 NAM	Ε					
STREET ADDRESS	2192 BROWN RD.	2192 BROWN RD.		ET /	address				
CITY-ST-ZIP	DEFUNIAK SPRINGS FL		2.4 CITY	/-S	iT-ZIP				
TITLE	D	DELETE	3.1 TITLE	_				Change	Additio
NAME	HERRING, DAVID		3.2 NAM	E					
STREET ADDRESS	2192 BROWN RD.				ADDRESS				
CHTY-ST-ZIP	DEFUNIAK SPRINGS FL		3.4. CITY						
TITLE	D DEI DINIMA OF THIS COST E	DELETE	4.1 TITLE		, 211			Change	Additio
NAME	BRYAN, VIRGIE		4.2 NAM		1				
	679 PRICE RD.				ADDRESS				
STREET ADDRESS	DEFUNIAK SPRINGS FL								
CITY-ST-ZIP		DELETE	4.4 CITY		I-ZIP			Change	Additio
TITLE	D WATOOM BUIDDIE	☐ NECELE	5.1 TITLE		1			L Grange	FT 900100
NAME	WATSON, BURRIS		5.2 NAM						
STREET ADDRESS	BROWN RD.		1		Address				
CITY - ST - ZIP	DEFUNIAK SPRINGS FL		5.4 CITY		i-ZIP				
TITLE	ST	DELETE	6.1 TITLE	Ē	1			Change	Addition
NAME	BRYAN, LAMAR		6.2 NAM	E					
STREET ADDRESS	669 BROOKHAVEN WAY		6.3 STRE	ET /	ADDRESS				
	ANCEMILE EL		1						

14. I do 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.

**FILED** 

Jan 17 1997 8:00am

Secretary of State