

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2004 8:00 am
Secretary of State

07-21-2004 90024 048 ****61.25

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DOCUMENT # N16338 1. Entity Name EAST SIDE CLUB, INC.					
Principal Place of Business 2017 N GOLDENROD STE. 9 ORLANDO, FL 32807 US				Mailing Address 2017 N GOLDENROD ORLANDO, FL 32807 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		07062004 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 59-2762451	
5. Certificate of Status Desired ☐		Applied For ☐ Not Applicable			
6. Name and Address of Current Registered Agent AQUINO, MICHAEL 214 CAPEHART DR. ORLANDO, FL 32807		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD AQUINO, MICHAEL 214 CAPEHART DR. ORLANDO, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD RICHARDSON, VINNIE 7655 DIONE CT ORLANDO, FL 32822	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BASIL Bulley 9940 Flynt Cir ORLANDO 32807 ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HANN, JENNIFER 6 ALBARROSS ST APOKA, FL 32713	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Charles DATE Barker 1811 OUTLINE LN CHRISTMAS 32709 ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BAILEY, KEVIN D 9410 KERR COURT ORLANDO, FL 32817	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FRANK Brooks 3851 Golden Meadows Ct OVIEDO 32765 ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BARKER, CHARLES DALE 14149 THAMHALL WAY ORLANDO, FL 32828	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Dixie Page 18688 12TH ST ORLANDO FLA 32833 ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Michael Aquino</i>			7-27-04 407-282-8437		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

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Attachments

66431274

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2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip			Country		
4. FEI Number 59-2762451			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent AQUINO, MICHAEL 214 CAPEHART DR. ORLANDO, FL 32807			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	TD AQUINO, MICHAEL 214 CAPEHART DR. ORLANDO, FL		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	CD RICHARDSON, VINNIE 7655 DIONE CT ORLANDO, FL 32822		TITLE NAME STREET ADDRESS CITY- ST- ZIP	CD BASIL BULLEY SEE ATTACHED	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD HANN, JENNIFER 6 ALBARROSS ST APOKA, FL 32713		TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD CHARLES DALE PARKER SEE ATTACHED	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DS BAILEY, KEVIN D 9410 KERR COURT ORLANDO, FL 32817		TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD FRANK BROOKS SEE ATTACHED	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD BARKER, CHARLES DALE 14149 THAMHALL WAY ORLANDO, FL 32828		TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD DIXIE PAGE SEE ATTACHED	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
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SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 7-27-04 Daytime Phone #		

Atchmann *66431274*

EAST SIDE CLUB
2017 Goldenrod Ave. # *N1638*
Orlando, FL 32807-8543
Telephone (407) 249-0159

BOARD OF DIRECTORS
FY 2004 OFFICERS

Executive Board

Chairman

BASIL BULLEY 9940 Flynt Cir., Orlando (407) 658-6189

President

DALE BARKER 1811 Outhie Ln., Christmas 32709 (407) 568-9828

Vice President

FRANK BROOKS 3851 Golden Meadow Ct, Oviedo, 32765 (407) 721-9994

Treasurer and

Resident Agent

MICHAEL AQUINO 214 Capehart Dr., Orlando 32807 (407) 282-8437

Secretary

DIXIE PAGE 18688 12th St., Orlando 32833 (407) 568-5383

Board Members

KEVIN BAILEY 103N. Deerwood Ave., Orlando 32817 (407) 963-6986

VINNIE RICHARDSON 7655 Dione Ct., Orlando 32822 (407) 277-0351

LISA RICHARDSON 7655 Dione Ct., Orlando 32822 (407) 277-0351

JENNIFER HAHN 6 Albatross St, Apopka 32713 (407) 310-6127

Alternates

VICTORIA FAGGEN 10360 Jepson St., Orlando 32825 (407) 277-3860

JOHN BARROWS 2134 Monastery Cr., Orlando 32822 (407) 658-1332