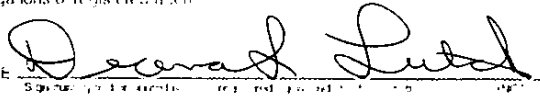
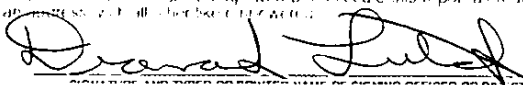


FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90156 044 ****61.25

NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N16765			
1. Entity Name GULLAIRE VILLAGE SOCIAL CLUB, INC.			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 1518 GULLAIRE BLVD State Apt # etc.		3. Mailing Address 1518 GULLAIRE BLVD State Apt # etc.	
City & State OLDSMAR, FL. Zip 34677 Country US		City & State OLDSMAR, FL. Zip 34677 Country US	
4. FEI Number Not Applicable		Applied For No/ Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
The DIANA S. LUTCH			
Street Address (if not the same as the corporation's) 497 LAKE WAY			
City OLDSMAR, FL.		Zip/City 34677	
8. I, the above named entity, submit 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  DIANA LUTCH 4/24/06			
9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
PD DIANA S. LUTCH 497 LAKE WAY OLDSMAR, FL. 34677		NAME STREET ADDRESS CITY/STATE/ZIP	
UB SALLY WILLS 437 SAILFISH BLVD. OLDSMAR, FL. 34677		NAME STREET ADDRESS CITY/STATE/ZIP	
SD KATHLEEN A. ROSIE 480 TROUT LANE OLDSMAR, FL. 34677		NAME STREET ADDRESS CITY/STATE/ZIP	
TD JOANN AMENDOLA 93 PELICAN DR. N. OLDSMAR, FL. 34677		NAME STREET ADDRESS CITY/STATE/ZIP	
NAME STREET ADDRESS CITY/STATE/ZIP		NAME STREET ADDRESS CITY/STATE/ZIP	
NAME STREET ADDRESS CITY/STATE/ZIP		NAME STREET ADDRESS CITY/STATE/ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exception stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report of application 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 registered agent empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or on an attachment with an affidavit of all other block filers.			
SIGNATURE  DIANA LUTCH 4/24/06			

CR-UB37B (12-02)