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NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1. Corporatio	MENT # N MBIAN CLUB #2,		3	(0)								
Principal Place	e of Business		Mailing Addr	ress					ALA IIDID KADA DIKUI HOID		1814 <b>Biğil Biğil</b>	11011 OFFICE HOL
2040 GRAND BLVD HOLIDAY FL 34690 HOLIDAY FL 34690												
								3. Date Incomp 09/21	orated or Qualified /1987	3a. [	Date of Last 02/01/1	Report <b>995</b>
2. Principal P	Place of Business		2a. Mailing A	\ddress				4. FEI Number 59-29	65081		-	oplied For lot Applicable
Suite, Apt.	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			\$8.75 Additional	
2∫ City & Stat	te		City & St	ate				6. Election Ca	mpaign Financing			Required  May Be
3			28			<u>.</u>			Contribution		•	to Fees
Zip 4	Coun	try	Zip <b>29</b>		Gourn 30	ntry			ation has liability for it	ntangible <sup>.</sup>		199.032,
• ]	9. Name and Add	ress of Current		ent	[30]		•	Florida Stat	Address of New Re			<del></del>
						81	Name				<del></del>	
POWERS, JAMES F.						82	Street Addr	ess (P.O. Box Num	iber is Not Acceptabl	le)		
	Snadbagger Lane Y Chapel Fl 33544				-	83						
	I Olini LL I L 00077	,					=:					
***************************************							City				65   Zip	Code
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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.

SIGNATURE: JAMES F. PONERS as My Howeld

1/25/96 (813)973-2800