## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

(2)

NYC-LINJ SOCIAL CLUB, INC.

FILED										
Feb 05 1998 8:00an	]									
Secretary of State										

Principal Place of Business Mailing Address						F CORTANDI BIB INDER INIDI TRINB DIN	A BON DAVA DA	1811 81811 81811 8	1811 <b>8</b> (8)1 1841	
BEY HILLS COMMUNITY CTR			668 W BUTTONBUSH LN			3. Date Incorporated or Qualified	i			
BEV HILLS BL   BEVERLY HILL		BEVERLY HILI US	LS FL 34465			12/14/1987				
US	5 1 E 57705	00				4. FEI Number		Ar	pplied For	
A Delastant F	No. 2 of Children	Do Blaise A	al al a a a a			59-2855647		<del>l . 1</del>	ot Applicable	
2. Principal F	Place of Business	2a. Mailing A	agress			5. Certificate of Status Desired			Additional equired	
Suite, Apt.	#, etc.	Suite, Ap	l. #, etc.			6. Election Campaign Financing	· ··· - · · · · · · · · · · · · · ·	\$5.00		
22		27				Trust Fund Contribution		Added to		
City & Stat	9	City & Sta	ite			7. Is this nonprofit corporation a	nomeowne	rs associatio	n?	
23		28	<del></del>			☐ Yes <b>Y</b> No				
Zip	Zip   Country		Zip Country		,	8. This corporation owes or has paid the current year			// ^	
24	25 9. Name and Address of Curre	[29]	3	10		Personal Property Tax due Jur			_No N//	
	9. Name and Address of Curr	eur Hegisteren Age	nt	81	Name	10. Name and Address of New F	egistered	Agent		
20110	/ SARPOT				IVAILIE					
	K, ROBERT			82	Street Add	dress (P.O. Box Number is Not Accepta	able)			
	Buttonbush LN .y Hills fl 34465			83						
DEVENIL	I THELO IL 34400							<del>- , - ,</del>		
}				84	City		FL	<b>85</b> Zip (	Code	
11. Pursuant	to the provisions of Sections 617.05	502 and 617.1508, F	orida Statutes	, the above	e-named cor	poration submits this statement for the	purpose p	of changing it	ts registered	
office or i	egistered agent, or both, in the Sta Im familiar with, and accept the obli	te of Florida. Such cl igations of, Section 6	hange was aut 17.0503, Florid	thorized by da Statutes	/ the corpora 3.	ition's board of directors. I hereby acc	apt the app	ointment as	registered	
SIGNATURE		•	,							
CIGITATORIE	Signature, typed or printed name of registered a	• .,	(NOTE: F	Registered Age	ent elgnature requ	lired when reinstating)	DATE			
12.		ND DIRECTORS	00,000	13.		ADDITIONS/CHANGES TO OFF	ICERS AND			
TATLE	PT DOTTE	L.	DELETE	1.1 TITLE				L. Change	Addition	
NAME	SCHACK, ROBERT			1.2 NAME						
STREET ADDRESS	668 W BUTTONBUSH LN			1.3 STREET						
CITY-ST-ZIP TITLE	BEVERLY HILLS FL		DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP			Change	Addition	
NAME	VPT	<b>'</b> —	DECEME	2.1 TITLE 2.2 NAME				☐ Change	Agginon	
STREET ADDRESS	HAFFEMEN, CHARLES 8876 N GRAPEFERN WAY			2.2 NAME 2.3 STREET	ADDDECC					
CITY-ST-ZIP	BEV HILLS FL			2.4 CITY - S						
TITLE	Ť		DELETE	3.1 TITLE	71-211		-	Change	Addition	
NAME	BLEITZHOFER, JOHN			3.2 NAME						
STREET ADDRESS	874 W COLBERT CT			3.3 STREET	ADDRESS					
CITY-ST-ZIP	BEVERLY HILLS FL			3.4. CITY- S	ST - Z#P					
TITLE	S		DELETE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME	HAFFEMNA, EVELYN			4. 2 NAME						
STREET ADDRESS	3876 N GRAPEFERN WAY			4.3 STREET	ADDRESS					
CITY-ST-ZIP	BEVERLY HILLS FL		<u></u>	4.4 CITY-S	T-ZIP					
TITLE	· · · · · · · · · · · · · · · · · · ·		DELETĒ	5.1 TITLE				☐ Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STAEET	ADDRESS					
CITY-ST-ZIP		·· · · · · · · · · · · · · · · · · · ·		5.4 CITY - ST	T-ZIP					
TITLE			DELETE	6.1 TITLE				Change	☐ Addition	
NAME				6.2 NAME						

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 12 fichanged, or on an attachment with an agdress.

JAN. 26,1998

252-746-2815