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Mar 11 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N24375 (0)

1. Corporation Name

MAPLE LEAF ESTATES WOODWORKERS CLUB, INC.

Principal Place of Business

2100 KINGS HIGHWAY  
PT. CHARLOTTE FL 33980

Mailing Address

2100 KINGS HIGHWAY  
PT. CHARLOTTE FL 33980-4258

3. Date Incorporated or Qualified  
01/15/1988

3a. Date of Last Report  
04/03/1996

4. FEI Number

85-0222638

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GIBSON, ROY  
2100 KINGS HWY  
UNIT 227  
PT. CHARLOTTE FL 33980

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME GIBSON, ROY  
STREET ADDRESS 2100 KINGS HWY., #227  
CITY-ST-ZIP PT. CHARLOTTE FL 33980

1.1 TITLE DT ☐ Change ☒ Addition  
1.2 NAME Larsen, Paul  
1.3 STREET ADDRESS 2100 Kings Hwy. #884  
1.4 CITY-ST-ZIP Pt. Charlotte, FL. 33980

TITLE VPD ☐ DELETE  
NAME HULWAY, JOSEPH  
STREET ADDRESS 2100 KINGS HWY., #830  
CITY-ST-ZIP PT. CHARLOTTE FL 33980

2.1 TITLE Aud. Eastwood, Edwin, H. Jr. ☐ Change ☒ Addition  
2.2 NAME 2100 Kings Hwy. #672  
2.3 STREET ADDRESS Pt. Charlotte, FL. 33980  
2.4 CITY-ST-ZIP

TITLE DS ☐ DELETE  
NAME ANGUS, WILMA  
STREET ADDRESS 2100 KINGS HWY #650  
CITY-ST-ZIP PT. CHARLOTTE FL

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE DT ☒ DELETE  
NAME WRIGHT, DOUGLAS  
STREET ADDRESS 2100 KINGS HWY., #791  
CITY-ST-ZIP PT. CHARLOTTE FL

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE: Edwin H. Eastwood, JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edwin H. Eastwood, JR. 941-625-1470

Date Daytime Phone # 0056196

CR2E037 (9/96)