

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 05, 1999 8:00 am
Secretary of State

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DOCUMENT # N24639

1. Corporation Name

NEW SMYRNA BEACH SENIOR MEN'S GOLF ASSOCIATION, INC.

Principal Place of Business

C/O SID C. PETERSON JR.
418 CANAL STREET
NEW SMYRNA BEACH FL 32168-7010

Mailing Address

C/O SID C. PETERSON JR.
418 CANAL STREET
NEW SMYRNA BEACH FL 32168-7010



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

02/02/1988

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

PETERSON, SID C., JR.
418 CANAL STREET
NEW SMYRNA BEACH FL 32069

10. Name and Address of New Registered Agent

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

TITLE **S** ☒ DELETE
NAME **PELOW, WARREN C**
STREET ADDRESS **438 BOUCHELLE DR. #105**
CITY-ST-ZIP **NEW SMYRNA BEACH FL**

TITLE **PRES.** ☐ DELETE
NAME **MURDOCK, RICHARD**
STREET ADDRESS **20 BIRDIE DRIVE**
CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

TITLE **D** ☒ DELETE
NAME **FIFE, ROBERT**
STREET ADDRESS **187 SPRUCE STREET**
CITY-ST-ZIP **NEW SMYRNA BEACH FL**

TITLE **TD** ☒ DELETE
NAME **ALBRIGHT, LESLIE**
STREET ADDRESS **22A COUNTRY CLUB DRIVE**
CITY-ST-ZIP **NEW SMYRNA BEACH FL**

TITLE **D** ☐ DELETE
NAME **KULCYK, JOHN**
STREET ADDRESS **103 INLET SHORE DR**
CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

TITLE **D** ☐ DELETE
NAME **BREWER, EDWIN**
STREET ADDRESS **604 EDWARD ST.**
CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **SECRETARY** ☒ Change ☒ Addition
1.2 NAME **TOWNSEND, GORDON**
1.3 STREET ADDRESS **30 OCEANS WEST BLVD. 2D40C**
1.4 CITY-ST-ZIP **DAYTONA BEACH SHORES 32118**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE **TOURNAMENT DIR.** ☐ Change ☐ Addition
3.2 NAME **FOOTE, CHARLES**
3.3 STREET ADDRESS **101 N. RIVERSIDE DR. #503**
3.4 CITY-ST-ZIP **NEW SMYRNA BEACH, FL. 32168**

4.1 TITLE **TREASURER** ☐ Change ☐ Addition
4.2 NAME **VAN DOREN, HARRY**
4.3 STREET ADDRESS **57 FAIRWAY CIRCLE**
4.4 CITY-ST-ZIP **NEW SMYRNA BEACH, FL. 32168**

5.1 TITLE **1** ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HARRIS **SECRETARY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(904) 427-9236

CR2E037 (11/98)