FILE NOW: FILING FEE IS \$61.25						FILED	
							Feb 21 1997 8:00am
	CORPORATION Sandra B. ANNUAL REPORT Secretary						
1997 Secretary Division of co						IS	Secretary of State
		31106	(0)		.=		
	IS CLUB OF LAKE		. FLORIDA, INC.				
11117.44							
Principal Plac	e of Business	Maiti	ng Address				
CR 47 D		CR 47	7 D				
PO BOX 979 PO BOX 979 LAKE PANASOFFKEE FL 33538-0979 LAKE PANASOFFKEE FL 33538-0979							
							3. Date Incorporated or Qualified 3a. Date of Last Report 03/09/1989 01/29/1996
2. Principal Place of Business 28. Mailing Address							4. FEI Number
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				<u></u>			075 A 184
22		27					5. Certificate of Status Desired L. Fee Required
City & State	e	28 C	lity & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country		ip		untry		8. This corporation has liability for intangible tax under s. 199.032,
24	25 9, Name and Addre	29 as of Current Register		30		·	Florida Statutes Yes D2 No 10. Name and Address of New Registered Agent
					81	Name	
WELDON, JACKSON P 82 Street A CR 306 B						Address (P.O. Box Number is Not Acceptable)	
PO BOX					83	••••	
LAKE PA	NASOFFKEE FL 335	38			84	City	FL 85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sect egistered agent, or both m familiar with, and acco	ions 617.0502 and 617 , in the State of Florida. apt the obligations of, S	.1508, Florida Statute Such change was ai Section 617.0503, Flor	s, the e uthorize rida Ste	ibove-r ed by ti itutes.	amed he corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name	of registered agent and title if a FFICERS AND DIRECT(Registere		ignature	a required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P		DELETE	1.1 1			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME STREET ADDRESS	WELDON, ELLEN CR 306 B				1.2 NAME		LR HID N
CITY-ST-ZIP	LK PANASOFFKEE	FL		1.4 CITY			LR 416 N <u>HL PAN AS VFT-KEE F-L</u> Channe MAddillion O
TIFLE	VD DELETE		DELETE	2.1 TITLE			
NAME STREET ADDRESS	RAY, CHUCK R 470			2.2 NAM 2.3 STR			MARBAY LARAINE ER 435
CITY - ST - ZIP	LAKE PANASOFFK	EE FL	······		city-st-		LK PANASOFFXEF FL
TITLE NAME	t Frizzell, Cliff		X DELETE	- 8.1 T	itle IAME		S D Addition
STREET ADDRESS	CR 470				STREET AL	DRESS	RAY LOUISE CR 4275
CITY-ST-ZIP	LK PANASOFFKEE	FL	DELETE		CITY-ST-	ZWP	LK PANASNEFLEB FL
TITLE NAME	D Macbay, lloyd			4.1 T 4.2	NAME		TD Change DAddition ANTLEY WILLIAM
STREET ADDRESS	CR 435				TREET AL	Dress	CR 416
CITY-ST-ZIP TITLE	LAKE PANASOFFK	EE FL	DELETE		UTY-ST-	liiP	LK PANASSEFKERFF
NAME	HODGES, GLORIA			5.1 T 5.2 N	IAME		
STREET ADDRESS	CR 470			5.3 \$	STREET AC	oress	
CITY-ST-ZIP TITLE	LAKE PANASOFFK	lee fi	DELETE	5.4 C 6.1 T	ITY-ST-	(#P	Change Addition
NAME			termi e su se la		IAME		עער איזער
STREET ADDRESS					STREET AC		
DITY-ST-ZIP 14. I do heret	by certify that the information	ation supplied with this	filing does not qualify	for the	aty-st-	otion 6	stated in Section 119.07(3)(i), Florida Statutes, I further certify that the
Informatio	n indicated on this annu	al report or supplement	tal annual report is tru	le and	BCCUIE	te and	t that my signature shall have the same legal effect as if made under oath; that report as required by Chapter 617, Florida Statutes; and that my name
SIGNAT	URE: JAI	SIGNAL	REALEOL	(SE)	KD	N. 1	NUMM HER 12 1197 50-793-3638