


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

APPROVED  
AND  
FILED

97 OCT 29 PM 1:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N35438 (3)

1. Corporation Name

SWEDISH CLUB OF SARASOTA, INC.

Principal Place of Business

Mailing Address

P.O. BOX 21722  
SARASOTA FL 34276

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SARASOTA FL 34276

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/27/1989	3a. Date of Last Report 03/25/1996
4. FEI Number 65-0164309	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

g. Name and Address of Current Registered Agent

WOLLSTADT, ROGER  
3960 KINGSTON DR  
SARASOTA FL FL 34238

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	BOCKMAN, JUDY	1.2 NAME	500002335445-4
STREET ADDRESS	307 BOBBY JONES RD	1.3 STREET ADDRESS	-10/31/97--01031--005
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE	D	2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	HANSSON, STEN	2.2 NAME	
STREET ADDRESS	3619 COUNTRY PLACE BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	SWANSON, RAGNAR	3.2 NAME	
STREET ADDRESS	5409 PLAZA DE LAS PALMES	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	WOLLSTADT, ROGER	4.2 NAME	
STREET ADDRESS	3960 KINGSTON DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	FRISTROM, LEORHARD	5.2 NAME	
STREET ADDRESS	4814 PEAT PT DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	BECKMAN, AGNES	6.2 NAME	
STREET ADDRESS	5736 AUGUSTA COURT	6.3 STREET ADDRESS	
CITY-ST-ZIP	HOKANIS FL	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 \_\_\_\_\_

CR2E037 (4/97)

Dept of STATE

10/27/97

ON 3/8/93 We sent you a  
Check in the Amount of \$ 61 <sup>715</sup> &  
received no acknowledgement.

When you mailed a second  
Notice the Secretary was out of  
the country and only returned  
recently. We used the envelope  
provided and do not understand  
what you people did with our  
check # 1193.

Swedish Club of Sarasota

Harold S. Ostrum  
Treasurer