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Feb 03 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 # N36447 (3)

1. Corporation Name

LAKE WORTH COLUMBIAN ASSOCIATION, INC.



Principal Place of Business

Mailing Address

~~JOHN MULDOWNEY~~
~~4820 CLINTON BLVD.~~
~~LAKE WORTH FL 33463-2237~~
US

NICHOLAS T. DeSoto
07-D ATRIUM CIR
ATLANTIS, FL
33462

P.O. BOX 1423
LAKE WORTH FL 33460-1423
US

2. Principal Place of Business

21 NICHOLAS T. DESOTO

Suite, Apt. #, etc.

22 07-D ATRIUM CIRCLE

City & State

23 ATLANTIS FL

24 Zip 33462

Country USA

2a. Mailing Address

25 07-D ATRIUM CIRCLE

Suite, Apt. #, etc.

27 07-D ATRIUM CIRCLE

City & State

28 ATLANTIS FL

29 Zip 33462

Country USA

3. Date Incorporated or Qualified
02/02/1990

3a. Date of Last Report
01/31/1996

4. FEI Number
59-2076032

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~MULDOWNEY, JOHN~~
~~4820 CLINTON BLVD.~~
~~LAKE WORTH FL 33463-2237~~

DeSoto NICHOLAS T.
07-D ATRIUM CIRCLE
ATLANTIS, FL 33462

81 Name

NICHOLAS T. DeSoto

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

07-D ATRIUM CIRCLE

83

ATLANTIS, FL 33462

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: *NICHOLAS T. DeSoto* NICHOLAS T. DeSoto SVD

01/24/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME FRITZ, JERRY
STREET ADDRESS %SUNCO LANDSCAPE, 2269 2ND AVE. NORTH
CITY-ST-ZIP LAKE WORTH FL 33460

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE SVD ☐ DELETE
NAME DESOTO, NICHOLAS T.
STREET ADDRESS 7-D ATRIUM WAY CIRCLE
CITY-ST-ZIP ATLANTIS FL 33462

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

TITLE VTD ☒ DELETE
NAME MULDOWNEY, JOHN
STREET ADDRESS 4820 CLINTON BLVD.
CITY-ST-ZIP LAKE WORTH FL 33463

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

TITLE VD ☐ DELETE
NAME GURKLIS, CHARLES
STREET ADDRESS 714 SNOWDON TERR.
CITY-ST-ZIP LAKE WORTH FL 33460

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: *NICHOLAS T. DeSoto* NICHOLAS T. DeSoto SVD 01/24/97 561-967-4289

CR2E037 (9/96)