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AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 OCT 22 AM 9:50 DOCUMENT # N46259 (0)SECRETARY OF STATE LANTANA WRESTLING CLUB, INC. Principal Place of Business Mailing Address 8467 116 TERRACE SOUTH 11103 TOWNSEND LANE 3. Date incorporated or Qualified BOIYNTON BEACH FL 33437-4519 BOIYNTON BEACH FL 33437-4519 12/03/1991 4. FEI Number Applied For 65-0339322 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired Palmet 101 Palmento Lin 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing **\$5.00** May Be 22 27 Trust Fund Contribution Added to Fees City & State v City & State 7. Is this nonprofit corporation a homeowners association? لكافتتك لكحو West 28 Yes ⊠No Zip Country Country 8. This corporation owes or has paid the current year Intangible 33405-403 30 SÀ 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name orchen **BOWMAN, SHERRY** Street Address (P.O. Box Number is Not Acceptable)
Palmetto Lane 82 7747 CANAL DR. 83 LAKEWORTH FL 33467 84 Zip Code 33405-443 beach 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 egent 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 200002674**99@**-Dadison -10/28/98--01088--015 TITLE DELETE 1.1 TITLE NAME TOWNSEND, GARY 1.2 NAME 11103 TOWNSEND LANE *****61.25 1.3 STREET ADDRESS STREET ADDRESS *****61.25 **BOYNTON BEACH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE esti, Samke Circle Change Addition NAME AGRESTI, SAM 2.2 NAME STREET ADDRESS 6090 BIRCH TREE TERR 2.3 STREET ADDRESS CITY-ST-ZIP LAKE WORTH FL 2.4 CITY-ST-ZIP ecretary Treasures, D TITLE 3.1 TITLÉ DELETE Change Porcher, Dale NAME PORCHER, DALE 3.2 NAME STREET ADDRESS 1701 CARANDIS RD. 3.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 3.4 CITY-ST-ZIP President, D Forcher, Hank 4.1 TITLE TILE DELETE Change Addition PORCHER, HANK NAME 4.2 NAME 101 PALMETTO LN STREET ADDRESS 4.3 STREET ADDRESS w Palm Beach Fl CITY-ST-ZIP 4.4 CITY-ST-ZIP TILE 5.1 TITLE **DELETE** Change Addition NAME BOWERS, SANDY 5.2 NAME 12780 SUNSET BLVD STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP ROYAL PALM BEACH FL 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

SIGNATURE:

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.