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May 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N47110 (4)**

1. Corporation Name

BEVERLY HILLBILLIES SQUARE DANCE CLUB, INC.

Principal Place of Business

**WALTER WEZWICK
3942 PASSION FLOWER WAY
BEVERLY HILLS FL 34465
US**

Mailing Address

**WALTER WEZWICK
3942 PASSION FLOWER WAY
BEVERLY HILLS FL 34465-3346
US**

2. Principal Place of Business

JACK W SMITH

2a. Mailing Address

231 - N-ENTRY OAKS PT

Suite, Apt. #, etc.

231 N-ENTRY OAKS PT

Suite, Apt. #, etc.

City & State

LECANTO FL

City & State

LECANTO FL

Zip

34461

Country

CITRUS

Zip

34461

Country

CITRUS

9. Name and Address of Current Registered Agent

**WALTER & BARBARA WEZWICK
3942 N PASSION FLOWER WAY
BEVERLY HILLS FL 34465**

3. Date Incorporated or Qualified

01/31/1992

3a. Date of Last Report

03/18/1996

4. FEI Number

59-3041177

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

10. Name and Address of New Registered Agent

81. Name

JACK & BETTY SMITH

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

231 - N-ENTRY OAKS PT.

83.

84. City

LECANTO

FL

85. Zip Code

34461

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

JACK W. SMITH

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/9/97

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

**PD HONDER, ELBERT
1 KANDAS ST
BEVERLY HILLS FL**

☒ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

**VB MURRAY, DAVE & DEE
56 S OSGEOA ST
BEVERLY HILLS FL**

☒ DELETE

**DT WEZWICK, WALTER & BARBA
3942 PASSION FLOWER WAY
BEVERLY HILLS FL**

☒ DELETE

**LEAVITT, LESLIE & SONY
864 W GLEASON DR
BEVERLY HILLS FL**

☒ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

**PAES MURRAY, DAVE & DEE
56 S OSGEOA ST
BEVERLY HILLS FL**

☐ Change ☒ Addition

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

**V PRES. LEAVITT, LESLIE & SONY
864 W GLEASON DR
BEVERLY HILLS FL**

☐ Change ☒ Addition

**TREAS. SMITH, JACK & BETTY
231 N ENTRY OAKS PT.
LECANTO FL 34461**

☐ Change ☒ Addition

**SECRETARY KATHERINE FLEE
952 W. BEARRASH LN.
BEVERLY HILLS FL 34465**

☐ Change ☐ Addition

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE 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: **DAVE MURRAY** RECORDED **Murray** 4/9/97 252-1746-3028
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)