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Jun 22 1998 8:00am
Secretary of State

NON PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N50741

1. Corporation Name
CROATIAN AMERICAN CLUB OF FLORIDA

Principal Place of Business	Mailing Address
SPIFFS. 2201 FIRST AVE NO St. PETERSBURG FL - 33713	P.O. Box 1036 INDIAN ROCKS BEACH FL. 34635 - 1036

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7047 SUNSET DRIVE Suite, Apt. #, etc. 22	2a. Mailing Address 26 P.O. BOX 41492 Suite, Apt. #, etc. 27	3. Date Incorporated or Qualified 4. FEI Number 59-3752106 ☐ 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
City & State 23 SOUTH PASADENA FL. Zip / Country 24 33707 / 25 PINELAS	City & State 28 St. PETERSBURG FL. Zip / Country 29 33743-1492 / 30 PINELAS	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
IVANKA HORVATICH 11506 WHISPERING HOLLOW DR TAMPA, FL. 33635	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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE IVANKA HORVATICH TREASURER Ivanka Horvatich 4-30-98
Signature, type or print name of registered agent 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	
TITLE	PRESIDENT ☐ DELETE D	1.1 TITLE	☐ Change ☐ Addition
NAME	NIVES DENNY	1.2 NAME	
STREET ADDRESS	1720 ALAMEDIAN DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL. 34609	1.4 CITY-ST-ZIP	
TITLE	FIRST VICE PRESIDENT ☐ DELETE D	2.1 TITLE	☐ Change ☐ Addition
NAME	SILVIJA WINKLER	2.2 NAME	
STREET ADDRESS	10826 INDIAL HILLS CT.	2.3 STREET ADDRESS	
CITY-ST-ZIP	LARGO FL. 33777	2.4 CITY-ST-ZIP	
TITLE	SECOND VICE PRESIDENT ☒ DELETE	3.1 TITLE	SECOND VICE PRESIDENT ☐ Change ☑ Addition
NAME	ELIZABETH FRANETA	3.2 NAME	VLATKA IVANISEVIC
STREET ADDRESS	2990 60TH WAY. NO	3.3 STREET ADDRESS	440 JARDIN LANE
CITY-ST-ZIP	ST. PETERSBURG FL. 33710	3.4 CITY-ST-ZIP	SARASOTA FL. 34238
TITLE	SECRETARY ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ANN-MARIE BOULTON	4.2 NAME	
STREET ADDRESS	18 KELLEY'S TRAIL	4.3 STREET ADDRESS	
CITY-ST-ZIP	OLDSMAR FL. 34677	4.4 CITY-ST-ZIP	
TITLE	TREASURER ☐ DELETE D	5.1 TITLE	☐ Change ☐ Addition
NAME	IVANKA HORVATICH	5.2 NAME	
STREET ADDRESS	11506 WHISPERING HOLLOW DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA, FL. 33635	5.4 CITY-ST-ZIP	
TITLE	SOCIAL EVENTS ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	ANN-MARIE HABER	6.2 NAME	FLORIDA DEPARTMENT OF STATE
STREET ADDRESS	7596 16TH ST. NO	6.3 STREET ADDRESS	06/23/98--01012--003
CITY-ST-ZIP	St. PETERSBURG FL 33702	6.4 CITY-ST-ZIP	***61.25

CR2E034 (10/97)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Ivanka Horvatich 4-30-98