2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2004 8:00 am
Secretary of State
04-15-2004 90024 043 ****61.25

DOCUMENT # N92000000927

1. Entity Name

OSCEOLA GERMAN/AMERICAN CLUB, INC.

Principal Place of Business	Mailing Address
4185 STORY RD SAINT CLOUD FL 34772 US	PO BOX 702127 ST. CLOUD FL 34772

MOORE CR2E037 (11/03)

2. Principal Place of Business	3. Mailing Address
4185 Story Road	P O Box
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Saint Cloud, Fl 34772	702127
City & State	City & State
	St. Cloud, Fl
Zip / Country	Zip / Country
34772 / Osceola	34770 / Osceola

4. FEI Number 59-3179887 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RAYZOR, WALTRUD 4185 STORY RD SAINT CLOUD FL 34772	Name: Waltrud Rayzor Street Address (P.O. Box Number is Not Acceptable): 4185 Story Road City: St. Cloud, Fl FL Zip Code 34772

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Traudi Rayzor President 4-12-04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RAYZOR, WALTRAUD 4185 STORY RD SAINT CLOUD FL 34772	☒ Delete	P Traudi Rayzor 4185 Story Road St. Cloud, FL 34772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CUSHING, JERRY 2395 WINDWARD COVE KISSIMMEE FL 34746	☒ Delete	VP Anna Ruscheinsky 102 Bear Lake Court Kissimmee, Fl. 34743	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SCHMITZ, HILDA 1015 MONROE AVE SAINT CLOUD FL 34769	☒ Delete	S Patricia Snyder P.O. Box 420221 Kissimmee, Fl 34742	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T URBAN, ANDY 2010 RUNNINGHORSE TRAIL SAINT CLOUD FL 34771	☐ Delete	T Urban, Andy 2010 Runninghorse Trail	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PATY, RICHARD 95 W CEDARWOOD CIRCLE KISSIMMEE FL 34744	☐ Delete	D PATY, Richard 95 W Cedarwood Circle Kissimmee, Fl 34744	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THEOBALD, KARL 1828 EDISON DR SAINT CLOUD FL 34771	☐ Delete	D Theobald, Karl 1828 Edison Dr. Saint Cloud, Fl 34771	☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia Snyder Patricia Snyder 4-12-04 407-933-2742
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #