FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

DOCU 1. Corporatio	MENT # N93000	0001150 (2))		
SUN COAST SHAG CLUB, INC.					
Principal Place of Business Mailing Address					80 83 50
2057 LITTLE NECK RD 2057 LITTLE NECK RD CLEARWATER FL 34615 CLEARWATER FL 34615					
				3. Date Incorporated or Qualified 03/01/1993	3a. Date of Last Report 03/22/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 4000 42 ND 57, 5. 26 4000 Suite, Apt. #, etc. Suite Apt. #			ND ST. S.	59-3166790	Not Applicable
22	#, 0.0 .	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
	etersburg FL		BURG, FL	Trust Fund Contribution	Added to Fees
Zip 24 337	Country 25 PINELLAS	^{Zip} 337//	Country 30 PINFILA	8. This corporation has liability for	
24, 007	9. Name and Address of Current	Registered Agent	30 PINELLA.	Florida Statutes [10. Name and Address of New F	Yes No
R1 Name					
ALDREDGE, RAY S 82 Street Address if				Address (P.O. Box Number is Not Acceptable	SON
2057 LITTLE NECK HD 4000				000 42ND ST.	<i>"5.</i>
CLEARV	VATER FL 34615				
			84 City	- Dorock Kull	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502 a	nd 617.1508, Florida Statutes	s, the above named co	PETERS BUK 6 proporation submits this statement for the pur	pose of changing its registered office
or register familiar wi	red agent, or both, in the State of Florida ith, and accept the obligations of, Sectio	. Such change was authorize n 617.0503, Florida Statutes.	d by the corporation's	proporation submits this statement for the pur board of directors. I hereby accept the appx	pintment as registered agent. I am
SIGNATURE V	I JACK KIWHITSON	- TORASULBIL /	Schola	horis 1	Paril 15 1996
12.	Signature, typed or printed name of registered agent an OFFICERS AND	d title if applicable.		equired when reinstating)	DATE
TITLE	P	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFF	
NAME	ALDREDGE, RAY S	4	1.2 NAME	DOUG HARRINGTON	☐ Change Addition
STREET ADDRESS	19135 US 19 N. APT H18		1.3 STREET ADDRESS	2420 CEDAKCKES	T Pl.
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP	UALRICO FL.	33594
TITLE	S	DELETE	2.1 TITLE	ν.	☐ Change 🙀 Addition
NAME	FOERSTER, MERRILEE	-	2.2 NAME	ANN DAUGHRITY	4 .
STREET ADDRESS	906 127 ST		2.3 STREET ADDRESS	8910 W. CLUSTER	
CITY-ST-ZIP TITLE	SEMINOLE FL	F Inc. etc	2.4 CITY-ST-ZIP	TAMIA FL	3 36/5
NAME	WHITSON, JACK R.	DELETE	3.1 TITLE		Change Addition
STREET ADDRESS	4000 42 ST S		3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		3.4. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TITLE	<i>5</i> .	Change Addition
NAME	Northrup, Lynn	- •	4. 2 NAME	SHERKY MCKNIGHT	•
STREET ADDRESS	2057 LITTLE NECK RD		4.3 STREET ADDRESS	124 D. LOBLOLLY C	L.T.
CITY-ST-ZIP	CLEARWATER FL		4.4 CITY-ST-ZIP	DLDSMAK FL	34677
TITLE	Р МОРТИРНИ ВАНИ	DELETE	5.1 TITLE	D. D. HARLES HALL	Change 💢 Addition
NAME	NORTHRUP, PAUL 2057 LITTLE NECK RD		5.2 NAME	CHARLES HALL 2628 DURANT DAK	's De
STREET ADDRESS CITY-ST-ZIP	CLEARWATER FL		5.3 STREET ADDRESS		22-01
TITLE	D	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	VALRICO FC	23394 Addition
NAME	WATSON, JAY		6.2 NAME		Change Nation
STREET ADDRESS	6924 69 AVE N		63 STREET ADDRESS		
CITY-ST-ZIP	PINELLAS PARK FL		6.4 CITY - ST - ZIP		
14. I do hereb	y certify that the information supplied with	h this filing is voluntarily fumis	hed and does not qua	lify for the exemption stated in Section 119.0	07(3)(k), 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 Bl

SIGNATURE: \$

TED NAME OF SIGNING OFFICER OR DIRECTOR OPEN 15, 1996 813-814-8999