

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

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90017 033 ****61.25

DOCUMENT # N93000004441

1. Entity Name

NEW GOLDEN KEY CLUB, INC.



Principal Place of Business

2840 WINDSOR LANE
MARIANNA FL 32446

Mailing Address

2840 WINDSOR LANE
MARIANNA FL 32446

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3209991

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

ELLIS, EDDIE L
2840 WINDSOR LANE
MARIANNA FL 32446

Name

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

City

FL

Zip Code

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

Eddie Lee Ellis - President

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

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	BAKER, ARTHUR	
STREET ADDRESS	3690 BURBANK RD	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	WILSON, LERDY JR	
STREET ADDRESS	3951 OLD US RD	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	S	<input type="checkbox"/> Delete
NAME	SYLVESTER, DANNY	
STREET ADDRESS	4324 WOODBERRY RD	
CITY-ST-ZIP	MARIANNA FL 32448	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	ELLIS, EDDIE L	
STREET ADDRESS	2840 WINDSOR LANE	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ROBINSON, WALTER	
STREET ADDRESS	4222 ROULHAS ST	
CITY-ST-ZIP	MARIANNA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Eddie Lee Ellis	
STREET ADDRESS	2840 WINDSOR LANE	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGE BAKER	
STREET ADDRESS	2838 BARNES ST.	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Eddie Lee Ellis - Eddie Lee Ellis 2-7-04 482-3245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #