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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE **Bandra B. Mortham**

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300005035 (1)

COUNTRY "KLICK" DANCERS, INC.

FILED May 08 1998 8:00am Secretary of State

| COUNTRY "KLICK" DANCERS, INC. | | | | |
|--------------------------------------------------|-----------------------------------------|--------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Principal Place of Business | | Mailing Address | | (1001113) 019 10100 11111 00111 00111 00111 00111 00111 00111 00111 |
| 11930 WALLE DRIVE JACKSONVILLE FL 32246 US | | 11930 WALLE DRIVE JACKSONVILLE FL 32246 US | | 3. Date Incorporated or Qualified 11/09/1993 4. FEI Number Applied For |
| | | | | 59-3211463 Not Applicable |
| 2. Principal Pl | ace of Business | 2e. Mailing Address 26 | | 5. Certificate of Status Desired Security Securi |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| City & State | 3 | City & State | | 7. is this nonprofit corporation a homeowners association? Yes X No |
| 23 Zip | Country | 28 Zip | Country | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 | 30 | Personal Property Tax due June 30. Yes No |
| 24 | 9. Name and Address of Curren | | 1001 | 10. Name and Address of New Registered Agent |
| | | | 81 Name | |
| RUSSELL, RAYMOND L JR | | | 82 Street Addre | ess (P.O. Box Number is Not Acceptable) |
| 11930 WALLE DR. | | | | |
| JACKSO | NVILLE FL 32246 | | 83 | |
| | | | 84 City | FL 85 Zip Code |
| SIGNATURE | m familiar with, and accept the obligit | | orida Statutes. TE: Registered Agent signature require | |
| 12. | OFFICERS ANI | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | P/D | DELETE | 1.1 TITLE | Change Addition |
| NAME | RUSSELL, RAYMOND L JR. | | 1.2 NAME | |
| STREET ADDRESS | 11930 WALLE DR. | | 1.3 STREET ADDRESS | |
| CITY+ST-ZIP TITLE | JACKSONVILLE FL VP/D | ☐ DELETE | 1.4 CITY - ST - ZIP 2.1 TITLE | Change Addition |
| NAME | MULLINS, ORVILLE E | | 2.2 NAME | |
| STREET ADDRESS | 4 BLUEFISH PLACE | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | PONTE VEDRA BEACH FL | | 2. 4 CITY - ST - ZIP | |
| TITLE | S/D | ☐ DELETE | 3.1 TITLE | Change Addition |
| NAME | RUSSELL, ANGELA P | | 3.2 NAME | |
| STREET ADDRESS | 11930 WALLE DR. | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | JACKSONVILLE FL T/D | DELETE | 3.4. City - ST - ZIP 4.1 TITLE | Change Addition |
| TITLE | MULLINS, BLONNIE L | - Deterie | 4.2 NAME | |
| NAME STREET ADDRESS | 4 BLUEFISH PLACE | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | PONTE VEDRA BCH. FL | | 4.4 CITY-ST-ZIP | |
| TITLE | | DELETE | 5.1 TITLE | Change Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | Dobert El (Julius) |
| TITLE | | ☐ DELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | |
| STREET ADDRESS | | | 8.3 STREET ADDRESS | |

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 poort 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.