**NONPROFIT** CORPORATION ANNUAL REPORT

1999

604

FT LAUDERDALE FL 33308



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # NOADOODOAA

Corporation Name	IDA INTERNATION	AL SKEET CLUB, II	NC.						
Principal Place of Bus	siness	Mailing Address			<u></u>	1			
2929 E COMMERCIAL 604 FT LAUDERDALE FL 3 US		2929 E COMMERCIAL BLVD 604 FT LAUDERDALE FL 33308 US							
2. Principal Place of	Business	2a. Mailing Addr	ress		····	3.	Date Incorporated or Qualifed 02/21/1994		
Suite, Apt. #, etc.		Suite, Apt. #	, etc.			4.	FEI Number <b>65-0479051</b>		
City & State		City & State				5.	Certifcate of Status Desired		
Zip	Country	Zip	Cou	intry		6.	Election Campaign Financing Trust Fund Contribution		
	24 25 29 30  9. Name and Address of Current Registered Agent					10.	Name and Address of New Regis		
				81	Name		· ·		
LAMBERTUS, ARTHUR W 2929 E COMMERCIAL BLVD				82	Street Addr	t Address (P.O. Box Number is Not Acceptable)			
Fare C A comme				00					

**FILED** Jun 21, 1999 8:00 am Secretary of State

06-21-1999 90002 022 \*\*\*\*61.25



10. Name and Address of New Registered Agent

			<u> </u>							
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalting)  DATE										
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	ORS IN 12						
TITLE	SD DELETE	1.1 TITLE	Change	☐ Addition						
NAME	LAMBERTUS, ARTHUR W	1.2 NAME								
STREET ADDRESS	2929 E COMMERCIAL BLVD STE 604	1.3 STREET ADDRESS								
CITY-ST-ZIP	FT LAUDERDALE FL 33308	1.4 CITY-ST-ZIP								
TITLE	PD DELETE	2.1 TITLE	☐ Change	☐ Addition						
NAME	CHANOUHA, AFIF	2.2 NAME		1						
STREET ADDRESS	420 S D HIGH #2L	2.3 STREET ADDRESS								
CITY-\$T-ZIP	CORAL GABLES FL 33146	2.4 CITY-ST-ZIP		Fring A A 470's s						
TITLE	TD DELETE	3.1 TITLE	☐ Change	Addition						
NAME	HOURANI, SAMI	32 NAME								
STREET ADDRESS	16081 SW 153 CT	3.3 STREET ADDRESS		}						
CITY-ST-ZIP	MIAMI FL 33187	3.4. CITY-ST-ZIP		Addition						
TITLE	☐ DELETE	4.1 TITLE	Change	☐ Addison						
NAME		4.2 NAME		ì						
STREET ADDRESS		4.3 STREET ADDRESS								
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Change	Addition						
TITLE	☐ DELETE	5.1 TITLE	t_] Change							
NAME		5.2 NAME								
STREET ADDRESS		5.3 STREET ADDRESS		\						
CITY-ST-ZIP		5.4 CITY-ST-ZIP	☐ Change	Addition						
TITLE	DELETE	6.1 TITLE		☐ ¥00///001						
NAME		6.2 NAME		Ì						
STREET ADDRESS		6.3 STREET ADDRESS								
CITY-ST-ZIP		6.4 CITY-ST-ZIP								

83

84 City

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

6-14-81 Date

Applied For

Fee Required \$5.00 May Be

Added to Fees

85 Zip Code

Not Applicable \$8.75 Additional