FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR -6 PM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000001952 (0)

1. Corporation Name
TEMPLE CREST CIVIC CLUB, INC.

Principal Place of Business	Mailing Address
4242 E. MILLER AVE. TAMPA FL 33617	4242 E. MILLER AVE. TAMPA FL 33617

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/20/1994
3a. Date of Last Report:
4. FEI Number: 59-3239689 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24 Country — 25
Zip — 29 Country — 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ALMERICO, KENDALL A
4809 E. BUSCH BLVD.
SUITE 104
TAMPA FL 33617

10. Name and Address of New Registered Agent

81 Name: Camella L. Dennis
82 Street Address (P.O. Box Number is Not Acceptable): 4221 S. Sandalwood Cr
83:
84 City: Tampa FL 85 Zip Code: 33617

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: [signature] 2/6/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	President/Director	☒ Change ☐ Addition
NAME	WATERS, WAYNE	1.2 NAME	Bryan Herring	
STREET ADDRESS	8308 N. 46TH ST.	1.3 STREET ADDRESS	8709 Orangeview Ave	
CITY-ST-ZIP	TAMPA FL 33617	1.4 CITY-ST-ZIP	Tampa FL 33617	
TITLE	DV	2.1 TITLE	Vice President-/Director	☒ Change ☐ Addition
NAME	DENNIS, ROBERT	2.2 NAME	John Dausman	
STREET ADDRESS	4221 S. SANDALWOOD CR.	2.3 STREET ADDRESS	4703 Riverhills Dr.	
CITY-ST-ZIP	TAMPA FL 33617	2.4 CITY-ST-ZIP	Tampa FL 33617	
TITLE	DS	3.1 TITLE		☐ Change ☐ Addition
NAME	PEARCE, JOYCE	3.2 NAME		
STREET ADDRESS	8309 TEMPLE PLACE	3.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33617	3.4 CITY-ST-ZIP		
TITLE	DT	4.1 TITLE		☐ Change ☐ Addition
NAME	DENNIS, CAMELLA	4.2 NAME		
STREET ADDRESS	4221 S. SANDALWOOD CR.	4.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33617	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP	# DEPOSITED BY BANK	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] 2/6/95 813/985-5999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Camella L. Dennis

3/6/95

084401