

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

FILED

95 FEB 21 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002692 (1)

1. Corporation Name

LIGHT CLUB #7 INCORPORATED

Principal Place of Business

6891 SAN JOSE LOOP
NEW PORT RICHEY FL 34655

Mailing Address

6891 SAN JOSE LOOP
NEW PORT RICHEY FL 34655

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/27/1994

3a. Date of Last Report

4. FEI Number

59-3245641

Applied For

Not Applicable

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

GASSMAN, ALAN S
1212 COURT ST.
SUITE B
CLEARWATER FL 34616

10. Name and Address of Now Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ZAMMETTI, JOHN
STREET ADDRESS 6891 SAN JOSE LOOP
CITY - ST - ZIP NEW PORT RICHEY FL 34655

TITLE D
NAME BLANKENBECKLY, CHARLES
STREET ADDRESS 6891 SAN JOSE LOOP
CITY - ST - ZIP NEW PORT RICHEY FL 34655

TITLE D
NAME GASSMAN, ALAN S
STREET ADDRESS 1212 COURT ST., SUITE B
CITY - ST - ZIP CLEARWATER FL 34616

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME D
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE D
2.2 NAME ZAMMETTI, DONNA
2.3 STREET ADDRESS 6891 SAN JOSE LOOP
2.4 CITY - ST - ZIP N.P.R. FL. 34655

3.1 TITLE DELETED
3.2 NAME GASSMAN, ALAN S.
3.3 STREET ADDRESS 1212 COURT ST., SUITE B
3.4 CITY - ST - ZIP CLEARWATER FL 34616

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 110.07(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 Block 13, whichever, or on an attachment with an address.

SIGNATURE:

John Zammetti
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-95 813-376-4753
(date) (telephone number)