

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Jul 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000002740 (8)

1. Corporation Name

SUNDANCE BINGO CLUB, INC.

Principal Place of Business

Mailing Address

6315 SANTA FE DRIVE
ZEPHYRHILLS FL 33540

6315 SANTA FE DRIVE
ZEPHYRHILLS FL 33540

3. Date Incorporated or Qualified

05/27/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

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. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

LOMMIS, LEE
6233 SANTA FE DR
ZEPHYRHILLS FL 33540

10. Name and Address of New Registered Agent

81 Name

George Rhinehart

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

39627 Sierra Dr.

83

84 City

Zephyrhills

FL

85 Zip Code

33540

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

George Rhinehart

(NOTE: Registered Agent signature required when reinstating)

7/14/98

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME LOOMIS, LEE
STREET ADDRESS 6233 SANTA FE DR
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE DVP ☐ DELETE

NAME HUSSEIN, WAYNE
STREET ADDRESS 6200 RED FEATHER DR
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE DS ☐ DELETE

NAME RICHER, JUNE
STREET ADDRESS 67311 SANTA FE DR
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE DT ☐ DELETE

NAME STROLIS, LINDA
STREET ADDRESS 6303 PUEBLO DR
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☐ Addition

1.2 NAME George Rhinehart
1.3 STREET ADDRESS 39627 Sierra Dr.
1.4 CITY-ST-ZIP Zephyrhills, FL 33540

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Linda Strolis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/14/98

Date

7838963

Daytime Phone #

CR2E037 (5/98)