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Mar 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra D. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000004019 (5)

1. Corporation Name
CITRUS DUPLICATE BRIDGE CLUB INC.

Principal Place of Business 2526 17TH AVE VERO BEACH FL 32960 US	Mailing Address 1366 41ST AVE VERO BEACH FL 32960 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 08/17/1994
4. FEI Number 65-0520731
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent CRAFT, JACK 1366 41ST AVENUE VERO BEACH FL 32960
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10. Name and Address of New Registered Agent 81 Name CRAFT, JACK 82 Street Address (P.O. Box Number is Not Acceptable) 1366 41ST AVENUE 83 City VERO BEACH FL 85 Zip Code 32960

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	CRAFT, JACK
STREET ADDRESS	1366 41ST AVENUE
CITY-ST-ZIP	VERO BEACH FL 32960
TITLE	STO
NAME	BRUCKER, GEORGE
STREET ADDRESS	1054 NW TUSCANY DR
CITY-ST-ZIP	PORT ST LUCIA FL
TITLE	D
NAME	CRAFT, MARGARET
STREET ADDRESS	1366 41ST AVENUE
CITY-ST-ZIP	VERO BEACH FL 32960
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	President
1.2 NAME	HANLON, GEORGE
1.3 STREET ADDRESS	2107 Sunrise Blvd.
1.4 CITY-ST-ZIP	Ft. Pierce, FL 34950
2.1 TITLE	Sec/Treas
2.2 NAME	Craft, Jack
2.3 STREET ADDRESS	1366 41 Ave
2.4 CITY-ST-ZIP	Vero Beach, FL 32960
3.1 TITLE	Director
3.2 NAME	Proctor, Don
3.3 STREET ADDRESS	4000 N A1A #702
3.4 CITY-ST-ZIP	Hutchinson Island 34949
4.1 TITLE	Director
4.2 NAME	Marion Maciejewski
4.3 STREET ADDRESS	410 11th Pl SW, Vero Beach, FL 32963
4.4 CITY-ST-ZIP	
5.1 TITLE	Director
5.2 NAME	Gloria Berg
5.3 STREET ADDRESS	237 Arbor Ln. Vero Beach, FL 32960
5.4 CITY-ST-ZIP	
6.1 TITLE	Director
6.2 NAME	Dorothy Polan
6.3 STREET ADDRESS	12425 Roseland Rd. Sebastian, FL 32958
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: Jack Craft JACK CRAFT 2/25/98 561-56T-8761

CR2E037 (10/97)