FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9400005204

1. Corporation Name

LA PALOMA SOCIAL CLUB, INC.

Principal Place of Business								
9200 MILITARY TRAIL								
#119								
RONTON REACH EL 33436								

Mailing Address

9200 MILITARY TRAIL

BONTON BEACH FL 33436

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90078 033 ****61.25



US		US								
Principal Place of Business 2a. Mailing Address					Date Incorporated or Qualifed					
21 9200 S-MILITARY TRAIL 28 9200 S-MILITA				Y TRAIL	10/18/1994					
Suite, Apt. #, etc. Suite, Apt. #, etc.					4. FEI Number		Appl	ed For		
22 CLUB HOUSE 27 CLUB HOUSE.					65-0565528			Applicable		
City & State City & State City & State City & State ROYNTON				H FL	A 5. Certificate of Status Desired		\$8.75 Ad Fee Requ			
Zip . Country Zip Co				untry	6. Election Campaign Financing		\$5.00 M			
24 33436 25 U.S 29 33436 30				Ц.:			Added to	Fees		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
•				GILLES IHERIAULT,						
PARENT, LUCIEN				82 Street Address (P.O. Box Number is Not Acceptable) 9200 S-MILITARY TRAIL # 022						
9200 MILITARY TRAIL #48				83	O J-MINITHEY MAIL	/				
BOYNTON BEACH FL 33436							<u>. </u>			
				84 City	OYNTON BEACH	FL	85 Zip Co	de 3 C		
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508. Florida Statu	es, the a	hove-named	corporation submits this statement for the r	nurpose of ch	anging its re	aistered		
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.										
	GILLES THERIAULT,			les I	Time the	04-10	1-99			
SIGNATURE	Signature, typed or printed name of registered agent a	nd trile if applicable. (NOT)		d Agent signature n						
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF					
TITLE .	VD	☑ DELETE	1.17	ITLE	A C	Į.	Change	☐ Addition		
NAME	PHILBERT, DOLORES	1.2 N		AME	LANIEL, CONRAD	#024		1		
STREET ADDRESS	9200 MILITARY TRAIL #178	1.3 \$		TREET ADDRESS	9200 MILITARY TRAIL, 9	۰ کرب ۱ د ۱		1		
CITY-ST-ZIP	BOYNTON BEACH FL			ITY-ST-ZIP	BOYNTON BEACH, FL 334	24	Change	Addition		
TITLE	D	DELETE 2.1 T				L	_ cliarige	Addition		
NAME	LE FRANCOIS, GENARD		IAME							
STREET ADDRESS	9200 MILITARY TRAIL, 103			TREET ADDRESS				1		
CITY-ST-ZIP	BOYNTON BEACH FL			CITY-ST-ZIP TILE	9		Change	Addition		
TITLE	ף"	_		IAME	HÉRIAULT, GILLES	_				
NAME	PARENT, LUCIEN			TREET ADDRESS	GOOD MILITARY TRAIL #	E022		į		
STREET ADDRESS	9200 MILITARY TRAIL #048 BOYNTON BE <u>AC</u> H F <u>L 33436</u>			CITY-ST-ZIP	BOYNTON BEACH, FL 334	136				
CITY-ST-ZIP	D D DEMON PL 33430	☐ DELETE	4.17		<u> </u>		_ Change	☐ Addition		
NAME	TREMBLAY, PIERRETTE	<u>-</u>		NAME						
STREET ADDRESS	9200 MILITARY TRAIL #138		4.3 8	TREET ADDRESS				l		
CITY+ST-ZIP	BOYNTON BEACH FL 33436		4.4 0	ITY-ST-ZIP						
TITLE	SD	■ DELETE	_	πLE	SD		€ Change	Addition		
NAME	GINGRAS, MURIELLE			AME	ROY, YOLANDE 9200 MILITARY TRAIL #	- 159				
STREET ADDRESS	9200 MILITARY TRAIL #74		5.3 9	TREET ADDRESS	9200 MILITARY IRAIL	./ 1 /		į		
CITY-ST-ZIP	BOYNTON BEACH FL			ITY-ST-ZIP	BOYNTON BEACH, FL. 33					
TITLE	DTR	DELETE	6.1 T		TD Direction	•	d Change	☐ Addition		
NAME	BEAUDOIN, MADELEINE		6.21	IAME	CARON, PIERRE 9200 MILITARY TRAILE	141				
STREET ADDRESS	9200 MILITARY TRAIL 162				To Bearing the same			•		
CITY-ST-ZIP	BOYNTON BEACH FL		6.4 (CITY-ST-ZIP	BOYNTON BEACH, FL. 3343	. 6				

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.