## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

N9400005591 (2)

## THE SURF CLUB DEBUTANTE BALL COMMITTEE, INC.

Principal Place of Business Mailing Address						1 (0.9)((0.9)	12111 BEILL BALL ESIGI SILE	Britis 18:81 listi 1861
	C/O THE SUI	RE CLUB	C/O THE SURF CLUB					
	9006 N COLL		9005 N COLLINS AVE					
	Surfside fl	33154	SURFSIDE FL 33154			3. Date incorporated or Qualifie	d 3a. Date of L	ast Report
						11/14/1994		9/1995
2.	Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	1	Applied For
21	]		26 201 Alhem	لصما	G	65-0572383		Not Applicable
	Suite, Apt. #	pt. #, etc. Suite, Apt #, etc.				E. Cadificate of Status Desired	\$8	.75 Additional
22			27 Suite 18	27 Suite 703		5. Certificate of Status Desired		ee Required
	City & State		Sty & State	9 ty & State		6. Election Campaign Financing	\$5.00 May Be	
23		<u> </u>	28 6000 600	28 Coupl (sebles		Trust Fund Contribution		dded to Fees
	Zip	Country	- Lece 1 192	Country	<b>'</b> Oo .	8. This corporation has liability f		er s. 199.032,
24		25	29 77.3367 30		<u> we -</u>	Florida Statutes	Yes No	
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
	81 Name					sue -		
ì	MAYER,	ROBERT M		82	82 Street Address (P.O. Box Number is Not Acceptable)			
	C/O KEL	LEY DRYE & WARREN			2474	S.W. 275	1en, sc	<b>Q</b>
	201 S B	SCAYNE BLVD SUITE 2400		83	1			
	MIAMI FI			84	Gitv <sup>®</sup>		[05]	Zin Gode.
				"	MIRM	i.	FL   "	33/33
1	1. Pursuant t	o the provisions of Sections 617.0	2502 and 617.1508, Forida Statutes, ti	ne above-	named corporal	tion submits this statement for the	purpose of changing	its registered office
	or registeri familiar wit	ed agent, or both, in the State or I h, and accept the obligations of, \$	Florida. Such change was authorized b Section 617.0503, Florida Statutes.	y the corp	poration's board	or directors. I fiereby accept the a	ppointment as registe	ered agent. i am
۱ ,	IGNATURE	· ·						
L		Signature, typed or printed name of registered	agent and title if applicative (NOTE: R	egistered Age	rt signature required v		DATE	
├	2.	OFFICERS	AND DIRECTORS	13.	··· •	ADDITIONS/CHANGES TO C		
TI	TLE	D	Doerele	1 1 TITLE			☐ Char	ige 🔲 Addition
N/	AME	whalen, elizabeth		1.2 NAME				
SI	REET ADDRESS 4261 PALM LN			1 3 STREET ADDRESS				
CI	ITY-ST-ZIP	MIAMI FL 33137		1.4 CITY - ST - ZIP				
TI	TLE	D []DELETE . 2		21 TITLE			☐ Char	nge 🔲 Addition
N/	AME	SCHECHTER, TERRY		2 2 NAME				
SI	TREET ADDRESS	9701 NE 5TH AVE		2 3 STREET ADDRESS				
CI	ITY - ST - ZIP	MIAMI SHORES FL 33138	B	2 4 CITY - ST - ZIP				
τī	TLE	D\$	[]DELETE	31 TITLE			. Char	nge 🔲 Addition
N	AME	STIEGLITZ, MIMI		3.2 NAME				
SI	TREET ADDRESS	8820 SW 52ND AVE		3.3 STREE	T ADDRESS			
C	ITY - ST - ZIP	MIAMI FL 33156		34 CITY-	-S1 - ZIP			
TI	TLE	DT	[]DELETE	ELETE 41 TITLE			Char	nge 🔲 Addition
N.	AME	WHALEN, MICHAEL		4. 2 NAME				
S	TREET ADDRESS	4261 PALM LN		4.3 STREE	T ADDRESS			
CI	TY - S* - ZIP			4 4 CITY-ST-ZIP				
TI	TLE		[]DELETE	5 1 TIFLE			Chai	nge 🔲 Addition
N-	AME			5 2 NAME				
S	TREET ADDRESS			53 STREE	I ADDRESS			
C	HTY - ST - ZIP			5 4 City-St-ZIP				
TI	ITLE			6.1 7:TLE			Chai	nge 🔲 Addition
N.	AME			6 2 NAME				
S	TREET ADDRESS			6 3 STREE	T ADDRESS			
	ITY-ST-ZIP			64 CITY-				
1			ilied with this filing is voluntarily furnishe annua! report or supplemental annual r					

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)(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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/96 305-448-5666

T (BALLICO) USO TERM OTOM UBITE DOIN ORAL DOIN BUILD ATTOM FILLO (CLOCK TARE 1901)

CR2E037 (12/95