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FILED
May 14 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N95000002401 (6)

1. Corporation Name

GOOD OLE BOYS CLUB, INC.



Principal Place of Business

Mailing Address

105 JACARANDA WAY
PARRISH FL 34219
US

105 JACARANDA WAY
PARRISH FL 34219
US

3. Date Incorporated or Qualified

05/18/1995

4. FEI Number

65-0630942

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 9612, 44th St, Cr 6.

26 9612, 44th St, Cr 6.

Suite, Apt., etc.

Suite, Apt., etc.

22 City & State

27 City & State

23 Parrish, FL

28 Parrish, FL

24 Zip

25 Country

29 Zip

30 Country

34219

Monroe

34219

Monroe

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAGARDE, JIM
431 43 ST BLVD W
PALMETTO FL 34221

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 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME WRIGHT, HERBERT
STREET ADDRESS 8502-25TH ST E
CITY-ST-ZIP PARRISH FL

DELETE

TITLE D
NAME BARNES, SKEETER
STREET ADDRESS 100 PALMVIEW RD
CITY-ST-ZIP PALMETTO FL

DELETE

TITLE D
NAME BYLER, BILL
STREET ADDRESS #8 JASMINE
CITY-ST-ZIP PALMETTO FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

1.1 TITLE Director
1.2 NAME Richard Kahley
1.3 STREET ADDRESS 3803 6th Ave W
1.4 CITY-ST-ZIP PALMETTO FLA 34221

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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: [Signature]

4-30-98

CR2E037 (10/97)