


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2007 8:00 am
Secretary of State

03-08-2007 90004 008 ****61.25

DOCUMENT # N97000001837 1. Entity Name BT SOCIAL CLUB INC.					
Principal Place of Business 2425 HARDEN BOULEVARD LOT 162 LAKELAND, FL 33803			Mailing Address 2425 HARDEN BOULEVARD LOT 162 LAKELAND, FL 33803		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3450449	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLIMAN, FRED 2425 HARDEN BOULEVARD LOT 162 LAKELAND, FL 33803			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$81.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PP UMENSETTER, CAROL 2425 HARDEN BLVD LOT 181 LAKELAND, FL 33803		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PATTERSON, MARION 2425 HARDEN BLVD LOT 240 LAKELAND, FL 33803		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MROCZKA, TOM LOT#44 2425 HARDEN BLVD LAKELAND, FL 33803	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CASTOR, LINDA LOT 228 2425 HARDEN BLVD LAKELAND, FL 33803		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MURRAY, ALICE LOT#72 2425 HARDEN BLVD LAKELAND, FL 33803	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HOLIMAN, LOIS 2425 HARDEN BLVD. LOT 162 LAKELAND, FL 33803		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NROCZKA, TOM LOT 44 2425 HARDEN BLVD LAKELAND, FL 33803		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BULLEN, ED LOT#195 2425 HARDEN BLVD LAKELAND, FL 33803	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATTERSON, MARION LOT 240 2425 HARDEN BLVD LAKELAND, FL 33803		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARFIELD, MARY LOT#243 2425 HARDEN BLVD LAKELAND, FL 33803	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Carol A Umensetter</i>			2-20-07 863-413-1639		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		