2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State
01-12-2006 90194 010 ****61.25

DOCUMENT # N97000005374

1. Entity Name
GERMAN AMERICAN CLUB OF SPRING-HILL, INC.

Principal Place of Business
13400 MONTOUR ST
BROOKSVILLE, FL 34613

Mailing Address
P.O. BOX 5341
SPRING HILL, FL 34611

01092006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
HEISE, HERBERT
6126 KRISTA DR.
SPRING HILL, FL 34609

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City | FL | Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	VP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	JOST, EDWARD	NAME	
STREET ADDRESS	5366 PATRICIA PLACE	STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 34607	CITY-ST-ZIP	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HORSTMANN, KLAUS	NAME	
STREET ADDRESS	18741 PARADE ROAD	STREET ADDRESS	
CITY-ST-ZIP	HUDSON, FL 34667	CITY-ST-ZIP	
TITLE	TD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HEISE, HERBERT	NAME	
STREET ADDRESS	6126 KRISTA DR.	STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 34609	CITY-ST-ZIP	
TITLE	SD ☒ Delete	TITLE	SD ☐ Change ☒ Addition
NAME	MEIER, PETER	NAME	VAN DYKEN, EDWARD
STREET ADDRESS	2367 COVINGTON AVE	STREET ADDRESS	475 Savoy Court
CITY-ST-ZIP	SPRING HILL, FL 34608	CITY-ST-ZIP	Spring Hill. FL 34606
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: H. Heise HERBERT HEISE 1/9/06 352-683-4012
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #