FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State . - * DIVISÍON OF CORPORATIONS

1999

DOCUMENT # N980000 2328 THE NEW JERSEY CLUB OF SPRING HILL, INC.

Principal Place of Business

Mailing Address

5233 HAMLET CIR. SPRING HILL, FU

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90066 037 ****61.25

325893 - 90066 - 37

2. Principal P	. Principal Place of Business				3. Date Incorporated of	r Qualifed			
21					APRIL 4. FEI Number NO	21 1998			
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number 1/6	ON-PROFIT	. —	lied For	
22	27				SOCIAL CLUB, N	O ONE IS PAIN		Applicable	
City & StateCity & State			المتساء ومعسا		5. Certificate of Status	Desired	-\$8.75 .A Fee Red		
23					<u> </u>	-		`	
Zip					- 6.=Election Campaign Trust Fund Contribu		ا- \$5:00 Added to	, ,	
24 25 29 30 9. Name and Address of Current Registered Agent			ربا		10. Name and Address of New Registered Agent				
	5. Name and Address of Current P	81	Name Q	1	_	.80			
				110	DERT J. K	00515			
				82 Street Address (P.O. Box Number is Not Acceptable)					
				83 FAMLET CIR.					
				SPRING HILL					
				City		FL	85 Zip C	ode 1606	
14. Charge at the provincing of Sections 617 0502 and 617 1508. Florida Statutes, the above-paged comporation 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.									
	ть таппінаг міліт, ана ассері тів obligation	na or, geodon o ry.000a, Florid	a vialules.					ł	
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: Re	agistered Agent	signature required	when reinstating)	· DATE			
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTOR	RS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	1			Change	☐ Addition	
NAME	ROBERT S. KOCSIS		1.2 NAME					}	
STREET ANDRESS	STREET ADDRESS 5233 HAMLIET CIR			ADDRESS				Ì	
CITY-ST-ZIP	000 110 1111 01 71/01								
			1.4 CITY-ST- 2.1 TITLE				Change	Addition	
NAME	OJGE TELESCO DELETE		2.2 NAME				_	Ì	
			2.3 STREET ADDRESS						
STREET ADDRESS	SPRING HILL, F.L. 34607								
CITY-ST-ZIP		DELETE	2. 4 CITY-ST 3.1-TITLE	-ZIP			Change	Addition	
, <u>-</u>	WARREN BARTIR	omo	3.2 NAME						
NAME	4665 KIRKLAND					<u> </u>			
STREET ADDRESS			3.3 STREET	·				{	
CITY-ST-ZIP	SPRING HILL, FL 34606		3.4. CITY-ST-ZIP		·		☐ Change	Addition	
TITLE	DERANK SIRIANNI		4.1 TITLE				ondinge		
NAME	4178 RAMONA DR		4. 2 NAME					{	
STREET ADDRESS	SPRING HILL, FL 34	1604	4.3 STREET						
· CITY-ST-ZIP			4.4 CITY-ST-	ZIP			Cheses	Addition	
TITLE	D LOU ZITO	☐ DELETE	5.1 TITLE	ļ			Change		
NAME	11352 BLYTHVILLE RD		5.2 NAME					ĺ	
STREET ADDRESS	DDRESS SPRING HILL FL 34606		5.3 STREET						
CITY-ST-ZIP	0.0		5.4 CITY-ST	ZIP			- OL:		
TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP				ZIP					
	ertify that the information supplied with	this filing does not qualify for th	e evemntic	n stated in Se	ction 119.07(3)(i) Florida	Statutes, I further certi	fy that the in	formation	

indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 1.13.07(3)(f), rivined statutes. Interfect that the limit and 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.

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR