Applied For Not Applicable

\$8.75 Additional

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9800003305

1. Corporation Name

MONSTER CLUB FOUNDATION SERVICES, INC.

Principal Place of Business 1551 SANDSPUR ROAD MAITLAND FL 32751

Suite, Apt. #, etc.

City & State

2. Principal Place of Business

Mailing Address

POST OFFICE BOX 4961 ORLANDO FL 32802-4961

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

FILED

99 APR 27 M1 9: 56

CLORSTARY OF STATE TALLAHASSEE, FLORIDA

3. Date Incorporated or Qualifed 06/08/1998

5. Certificate of Status Desired

4. FEI Number



23		28			(5. Cerinicate of Status L	Jesireo L	. ل	Fee Re	quired
Zip	Country	Zip	Country			6. Election Campaign F	inancing _	٦	\$5.00	May Be
24	25	29	30			Trust Fund Contributi	ion	J 	Added to	o Fees
9. Name and Address of Current Registered Agent						 Name and Address 	of New Regi	istered Age	nt	
•					me					
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 JORTH ORANGE AVENUE ORLANDO FL 32801				Stre	eet Address	(P.O. Box Number is No	ol Accentable	<u> </u>		
								, 		
				Ī						
				City					5 Zip C	
			84	Спу	y			FL °	5 Zip C	,00 0
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 ager	nt and tille if applicable (NOTE	Registered Ager	l signat	ture required who			DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGE	S TO OFFICE			
TITLE	D	DELETE	1.1 TITLE		ļ				Change	☐ Addition
NAME	GINSBURG, RONALD		1.2 NAME		- 1					
STREET ADDRESS	1551 SANDSPUR ROAD		1.3 STREE	ADDRE	ESS					j
CITY-ST-ZIP	MAITLAND FL 32751		1.4 CITY-S	-ZIP			~			
TITLE	D	DELETE	21 TITLE		}				Change	Addition
NAME	GINSBURG, SHARON L		22 NAME			© CHTH	a ara espe	o car	ري در د در	
STREET ADDRESS	1551 SANDSPUR ROAD 238		23 STREE	ADDRE	ESS	# _{1,00} 0 # _{1,00} 0 # _{1,00} 0 # ₁	0028 -04/30/	กัดตัวสำนัก	140	ຄາວ 💆
CITY-ST-ZIP	MAITLAND FL 32751		2 4 CITY-5	T-ZIP						
TITLE	D	☐ DELETE	31 TITLE				*****	1.50	Change	Addition
NAME	GINSBURG, JEFFREY S		32 NAME)					j
STREET ADDRESS	1551 SANDSPUR ROAD		33STREE	ADORE	ESS					
CITY-ST-ZIP	MAITLAND FL 32751		34 CITY-9	T-ZIP	j					ļ
TITLE		☐ DELETE	4.1 TITLE						Change	Addition
NAME.			4. 2 NAME		- 1					
STREET ADDRESS			4.3 STREET	ADDRE	ESS					ļ
CITY-ST-ZIP	<u> </u>		44 CITY-S	T-71P						
TITLE		☐ DELETE	51 TITLE		7				Change	Addition
NAME			5 2 NAME							
STREET ADDRESS			53 STREE	ADDRE	ESS					İ
CITY-\$T-ZIP			54 CITY-S	T-ZIP	ļ					j
TITLE		☐ DELETE	6 1 TITLE			·— · · · · · · · · · · · · · · · · ·			Change	Addition
NAME			62 NAME		{					\wedge
STREET ADORESS			63 STREE	ADDRE	ESS					II
CITY-ST-ZIP			64 CITY-\$	r-Z⊮	- [1	(MY)
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, with all other like empowered.