FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



SIGNATURE: LARRY MªCUTCHEON TREASUREN

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P35848

(1)

EBONITE RECREATION CENTERS, INC.

FILED									
Feb 04 1998 8:00am									
Secretary of State									

I INDICAN IND TIME DEIDE INES DENDE INC. DENCE DENLE DIRECTORIES DENCE DENCE DEN

Principal Place of Business Mailing Address								ALDIA DIBIA BIB	16 QCQ66 70Q6
-2201 CANTU COURT									
SUITE 110		SUITE 118			[DO NOT WRITE IN THIS SPACE			
SARASOTA F	5215 3014 S	T- HE COOP			ŀ	3. Date Incorporated or Qualified	E IN IMIS S	FACE.	
00	PARCEITAL	EL SUSAR			- 1				
2. Principal P	READENTON	. 2a. Mailing Address				10/09/1991 4. FEI Number			polied For
21 322 8	JAMES CAMPBELL Blu	126 322 E. James	anoh	P111311		65-0286989		F-1-	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			-				Additional
22		27			_ }	5. Certificate of Status Desired		•	egulred
City & State	1	City & State			Ţ	6. Election Campaign Financing		\$5.00	May Be
al Colui		28 COLUMBIA, IN				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Count	ry		8. This corporation owes or has p	_		
4 384	9, Name and Address of Current		30			Personal Property Tax due Jun 10. Name and Address of New R			_ No
		Hedistelen Water		1 Name		U. Name and Address of New N	ediste.ed v	raeur	
	LLOY, THOMAS T	DATH CHOSET FA							
	11 CANTU CT. 52/5	3014 SIKEEN 44	82 Street Addre			(P.O. Box Number is Not Accepta	ble)		
- 60	RE 110 BRADE	3074 STREET EA UTON, FL 3420	3 h	3					
UN I	MODIATE STESS	•							
			8	4 City			FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607,0502	and 607 1508. Florida Statutes	s the abr	ve-named o	corpora	tion submite this statement for the		changing i	to registered
Office or re	epistered agent, or both, in the State o	ol Florida. Such change was au	uthorized	by the corp	poration'	s board of directors. I hereby acce	pt the appo	onanging in ointment as	registered
•	m familiar with, and accept the obligat	Jons of, Section 607.0505, Flori	ioa Statut	es.					
SIGNATURE	Signature, typed or printed name of registered agent	I and title if applicable (NOTE:	Registered A	gent signature r	required w	hen reinstalling)	DATE		
12.	OFFICERS AND	·	13.			ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 TITUE					Change	Addition
NAME	TUTTLEMAN, STANLEY C.		1.2 NAM						
STREET ADDRESS	375 N HIGHLAND AVENUE		1.3 STRE	ET ADDRESS					
CITY-ST-ZIP	MERION STATION PA		1.4 CITY	-ST-ZIP					
TITLE	D	DELETE	2.1 TITLE					Change	Addition
NAME	SCHEID, WILLIAM T.		2.2 NAM	E .					
STREET ADDRESS	1329 SHALLOW LAKE CIRCLE		2.3 STRE	ET ADDRESS			**		
CITY-ST-ZIP	HOPKINSVILLE KY		2. 4 CITY	- S1 - Z(P					
TITLE	SD	☐ DELETE	3.1 TITLE	.]				Change	Addition
NAME	TUTTLEMAN, STEVEN M.		32 NAM	:					
STREET ADORESS	40 BEDFORD STREET		3.3 STRE	ET ADDRESS					
CITY-ST-ZIP	NEW YORK NY	——————————————————————————————————————	-	- ST - ZIP				<u> </u>	
TITLE	PTD	DELETE	4.1 TITLE	,				Change	Addition
NAME	MALLOY, THOMAS V., JR		4. 2 NAV						
STREET ADDRESS	24 MARINA VILLAGE WAY			ET ADDRESS					
CITY-ST-ZIP	SALEM SC	Theiere	4.4 C(TY					Channe	A marticle in
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition
NAME CONTROL ADDRESS			5.2 NAM	1					
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	6.4 CITY					Change	Addition
NAME		- pricit	6.2 NAMI					Onange	LJ AUGINION
STREET ADDRESS			B .	ET ADDRESS					
CITY-\$T-ZIP	ertify that the information supplied with	n this filing does not qualify for	6.4 CITY		d in Sec	tion 119 07(3)(i) Florida Statutee	further cer	tify that the	information
indicated of officer or o	on this annual report or supplemental director of the corporation or the recei or Block 13 if changed, or on an attact	annual report is true and accur ver or trustee empowered to ex	rate and t	hat my sign	nature si	hall have the same legal effect as i	f made und	ler oath: the	atlam an