

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90075 015 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P35848

1. Corporation Name

EBONITE RECREATION CENTERS, INC.

Principal Place of Business

**322 E. JAMES CAMPBELL BLVD
COLUMBIA TN 38401
US**

Mailing Address

**322 E. JAMES CAMPBELL BLVD
COLUMBIA TN 38401
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/09/1991

4. FEI Number

65-0286989

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

EBONITE RECREATION CENTERS, INC.

2a. Mailing Address

Suite, Apt. #, etc.

322 E. JAMES CAMPBELL BLVD

City & State

COLUMBIA, TN

Zip

38401

Country

USA

Zip

Country

9. Name and Address of Current Registered Agent

**MALLOY, THOMAS T
5215 30TH ST. EAST
SUITE 116
BRADENTON FL 34203**

10. Name and Address of New Registered Agent

81. Name

MORGAN R. BENTLEY, ESQ.

82. Street Address (P.O. Box Number is Not Acceptable)

C/O WILLIAMS, PARKER, HARRISON, DIETZ & GETZEN

83.

200 SOUTH ORANGE AVENUE

84. City

SARASOTA

FL

85. Zip Code

34236

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Morgan R. Bentley
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/26/99
Date

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
TUTTLEMAN, STANLEY C.
375 N HIGHLAND AVENUE
MERION STATION PA**

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHEID, WILLIAM T.
1329 SHALLOW LAKE CIRCLE
HOPKINSVILLE KY**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
TUTTLEMAN, STEVEN M.
40 BEDFORD STREET
NEW YORK NY**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
MALLOY, THOMAS V., JR
24 MARINA VILLAGE WAY
SALEM SC**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TREASURER
LARRY C. MCCUTCHEON
537 PINE CIRCLE
HOHENWALD, TN. 38462**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SECRETARY
MELINDA A. MCDAVID
1265 JOSTIN DRIVE
CLARKSVILLE, TN. 37040**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 607, 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.

SIGNATURE: *Larry C. McCutcheon* **LARRY C. MCCUTCHEON - TREASURER** **4/24/99** **931-380-2092**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)