

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

95 MAY -1 PM 12: 27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000006793

1. Corporation Name

Club Calling Corp.

Principal Place of Business

Mailing Address

5770 Roosevelt Blvd.
Suite 701
Clearwater, Fla. 34620

5770 Roosevelt Blvd.
Suite 701
Clearwater, Fl 34620

DO NOT WRITE IN THIS SPACE

2a. Date Incorporated or Qualified 3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21

26

59-3222923

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

23

27

Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

24

Country

25

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Registered Corporate Agents, Inc.
602 S. Greenwood Ave.
Clearwater, Fla. 34620

81 Name

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

83

84 City

FL

85 Zip Code

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the application

(NOTE: Registered Agent signature required when submitting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DPT

11 TITLE

☐ Change ☐ Addition

NAME

Turtarow Kenneth

12 NAME

600001521366

STREET ADDRESS

800 Harbor Island

13 STREET ADDRESS

-06/23/95--01008--020

CITY ST ZIP

Clearwater Fla. 34620

14 CITY ST ZIP

****200.00 ****200.00

TITLE

V/S

21 TITLE

☐ Change ☐ Addition

NAME

Johnson, Dan

22 NAME

STREET ADDRESS

3334 Brian Rd. N.

23 STREET ADDRESS

CITY ST ZIP

Balm Harbor, Fla. 34685

24 CITY ST ZIP

TITLE

31 TITLE

☐ Change ☐ Addition

NAME

32 NAME

STREET ADDRESS

33 STREET ADDRESS

CITY ST ZIP

34 CITY ST ZIP

TITLE

41 TITLE

☐ Change ☐ Addition

NAME

42 NAME

STREET ADDRESS

43 STREET ADDRESS

CITY ST ZIP

44 CITY ST ZIP

TITLE

51 TITLE

☐ Change ☐ Addition

NAME

52 NAME

REMITTED BY MAY 1

STREET ADDRESS

53 STREET ADDRESS

CITY ST ZIP

54 CITY ST ZIP

TITLE

61 TITLE

☐ Change ☐ Addition

NAME

62 NAME

JP 6/22

STREET ADDRESS

63 STREET ADDRESS

CITY ST ZIP

64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR