

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 11:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000008712 (9)

1. Corporation Name

THE 500 CLUB, INC.

Principal Place of Business

9438 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32225

Mailing Address

9438 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/03/1994

3a. Date of Last Report

2. Principal Place of Business

21 1533 ATLANTIC BLVD

2a. Mailing Address

26 1533 ATLANTIC BLVD.

4. FEI Number

59 - 3244887

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

23 NEPTUNE BEACH, FL

City & State

28 NEPTUNE BEACH, FL

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

Country

24 32266

25 DUVAL

Zip

Country

29 32266

30 DUVAL

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PATANGAN, ORBITO I
9438 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32225

81 Name

PATANGAN, ORBITO I.

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

1533 ATLANTIC BLVD.

83

84 City

NEPTUNE BEACH

FL

85 Zip Code

32266

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

THE SAME AGENT

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
P. D
ORBITO I. PATANGAN
STREET ADDRESS
1533 ATLANTIC BLVD.
CITY- ST- ZIP
NEPTUNE BEACH, FL 32266

1 TITLE
NAME
D
FELY RAUSCHMEYER
13 STREET ADDRESS
7628-3 103RD ST.
14 CITY- ST- ZIP
JACKSONVILLE, FL 32210

☐ Change ☒ Addition

TITLE
NAME
VP, D
JOE LAVERIO
STREET ADDRESS
1533 ATLANTIC BLVD
CITY- ST- ZIP
NEPTUNE BEACH, FL 32266

21 TITLE
NAME
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
T
NORMITA PAPA- PATANGAN
STREET ADDRESS
4618 NORWOOD AVE.
CITY- ST- ZIP
JACKSONVILLE, FL 32206

31 TITLE
NAME
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
D
PILCHY NAVARRO
STREET ADDRESS
1700 WELLS ROAD PLAZA
CITY- ST- ZIP
ORANGE PARK, FL 32073

41 TITLE
NAME
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
D
AUTON VILLANUEVA
STREET ADDRESS
2000 WELLS ROAD
CITY- ST- ZIP
ORANGE PARK, FL 32073

51 TITLE
NAME
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
D
LARRY GARCIA M.D.
STREET ADDRESS
3241 JOSE CIRCUS WEST
CITY- ST- ZIP
JACKSONVILLE, FL 32217

61 TITLE
NAME
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

☐ Change ☐ Addition

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 119.07(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:

ORBITO I. PATANGAN

4/25/95 (904) 241-1508

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR