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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P94000016629 (5) DOCUMENT #

ASSOCIATED CLUB MANAGEMENT CORP.

**FILED** May 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							IDIN IDII IDII		
11780 U.S. H SUITE 600 N. PALM BE/	SUITE 6	11780 U.S. HWY, 1 SUITE 600 N. PALM BEACH FL 33408			DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE			
ALTHER DENOTTE SOURCE							3. Date Incorporated or Qualified		
							03/02/1994		
<del></del>	Place of Business	$\vdash$	g Addr <b>e</b> ss				1		
Suite, Apt	# elc	26 Suite	Suite, Apt. #, etc.				ot Applicable		
22	w, 010.	}- <del></del> -	27			L 6 Certificate of Status Desired 1 1	Additional leguired		
City & Stat	е		City & State			6. Election Campaign Financing \$5.00	May Be		
23 .			28				Trust Fund Contribution		
Zip		Country		Zip Cour		/	8. This corporation owes or has paid the current year Intangible		
24 25 Name and Address of Current			29 Pol Boolstered (	gent 30			Personal Properly Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
CORPORATE CREATIONS ENTERPRISES INC.  81 Nam							(U, Italia di Italia		
4521 PGA BLVD.					82	Ctroot	Address (P.O. Box Number is Not Acceptable)		
SU	JITE 211					t Address (F.O. Box Number is Not Acceptable)			
PALM BEACH GARDENS FL 33418			8						
					84	City	FL 85 Zip	Code	
11, Pursuant	to the provisions of	of Sections 607.05	602 and 607.150	8, Florida Statuto	os, the abov	l e-named	d 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									
						tored Agent signature required when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		50 11 10	
TOLE		OFFICENSA	NO DINECTORS	DELETE	13.	<del> · · · · · · · · · · · · · · · · · · </del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	Addition	
NAME	MALESARDI	. Robert e			1.2 NAME		change		
STREET ADDRESS 11780 U.S. HWY. 1					ADDRESS				
CITY-ST-ZIP	N. PALM BE	ACH FL 33408			1.4 CITY-1	ST-71P			
TITLE	D			DELETE	2.1 TITLE		☐ Change	Addition (	
NAME	ARCHIBALD				2.2 NAME			ŀ	
STREET ADDRESS	11780 U.S.				23 STREE	ADDRESS			
CITY-ST-ZIP	N. PALM BE	ACH FL 33408		DELETE	2. 4 CITY-	ST-ZIP		4.4400	
TITLE NAME	ANDERSON,	wĸ		□ DEFEIE	3.1 TITLE		L.] Change	L. Addition	
STREET ADORESS	11780 U.S.				3.2 NAME 3.3 STREE	<b>AUU</b> becc			
CITY-ST-ZIP	N. PALM BE				3.4. CITY-				
TITLE	D			XXDELETE	4.1 10LE	<u>-1.52.</u>	Change	Addition	
NAME	\$TERNSTEIN	1, Jerome s			4. 2 NAME			İ	
STREET ADDRESS	11780 U.S. I				4.3 STREET	ADDRESS			
CITY-ST-ZIP	N. PALM BE	ACH FL 33408			4.4 CITY - 5	ST-ZIP			
TITLE				☐ DELETE	5.1 TITLE		M Change	Addition	
NAME					5.2 NAME		Matlaga, Steven		
STREET ADDRESS					5.3 STREE		11780 U.S. HWY 1		
CITY-ST-ZIP				ODETE	5.4 CITY - 3	T-ZIP	N. PALM BEACH, FL 33408 Change	T Addy	
TITLE				DELETE	6.1 TITLE		· 1_1 Change	☐ Addition	
NAME CTOTET ADODESS					6.2 NAME	*000500	•		
STREET ADDRESS					6.3 STREET				
CITY-ST-ZIP					6.4 CITY - S	11-711	1		

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.

alanloo