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pg. 102

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 AUG -1 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P960000 98697

1. Corporation Name

Community Bingo Services, INC

Principal Place of Business

Mailing Address

2415 N. Monroe St
303

PO Box 15095
Tallahassee, FL
32317

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

12-6-96

3a. Date of Last Report

4. FEI Number

59-3415877

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 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

W. E. Thomas
3326 Hickory Hollow
Tallahassee FL 32308

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME W. E. Thomas
STREET ADDRESS 3326 Hickory Hollow
CITY - ST - ZIP Tallahassee, FL 32308

☐ DELETE

TITLE P
NAME Barbara D. McClellan
STREET ADDRESS Rt 3 Box 60
CITY - ST - ZIP BRISTOL, FL 32321

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
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CITY - ST - ZIP

☐ DELETE

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

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

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

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

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

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

000002254890-3
-08/01/97-01052-002
****215.00 ****165.00

☐ Change

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14. I do 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.

SIGNATURE: Barbara D. McClellan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 1, 1997 850-383-0670
Date Daytime Phone

CR2E034 (9/96)

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Aug. 1, 1997

Secretary of State
Dept. of State
Corporations Division
Washington, DC

Dear Sir:

I, Barbara W. McClan, never
received my first notice of annual
report.

Very truly yours,

Barbara W. McClan
President
Community Bingo Services, Inc