

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # S57398

1. Corporation Name

WALTON COUNTY SHRINE CLUB HOLDING COMPANY, INC.

Principal Place of Business

36 S. 9TH ST.
DEFUNIAK SPRINGS FL 32433

Mailing Address

36 S. 9TH ST.
DEFUNIAK SPRINGS FL 32433

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90012 019 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/05/1991

4. FEI Number

59-3073778

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

MOORE, JAMES E
102 BAYSHORE DRIVE
NICEVILLE FL 32578

10. Name and Address of New Registered Agent

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

TITLE PD ☒ DELETE

NAME HILGENBURG, CARL
STREET ADDRESS 203 RED EYE ROAD
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE VPD ☐ DELETE

NAME NALL, JOE
STREET ADDRESS 441 HIDDEN LAKE TRAIL
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE D ☐ DELETE

NAME BELL, WILLIAM J.
STREET ADDRESS 372 BELL ROAD
CITY-ST-ZIP DEFUNIAK SPRINGS, FL 32433

TITLE SD ☒ DELETE

NAME HANEY, JACK
STREET ADDRESS 499 VANDERHEIDE RD
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES E. MOORE, Secretary

Date

Daytime Phone #

3/23/99 850-6781121

CR2E034 (1/198)