

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **143556** (9)
1. Corporation Name
BRADENTON COUNTRY CLUB, INC



Principal Place of Business: **4646 9TH AVE W BRADENTON FL 34209-3915**
Mailing Address: **4646 9TH AVE W BRADENTON FL 34209-3915**

2. Principal Place of Business: 21 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country; 25
2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country; 30

3. Date Incorporated or Qualified: **12/19/1944** 3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-0565784** 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

**BRAND, JAMES R.
4646 9TH AVE, W
BRADENTON FL 33529**

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 607.0307 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, as both in the State of Florida. Said change was authorized by the corporation's board of directors. Thereby, accept the appointment as registered agent. I am familiar with, and accept the obligations of Sections 607.0307, Florida Statutes.

SIGNATURE

Signature of the Current Registered Agent (Print Name, Title, and Address) _____ DATE _____
Signature of the New Registered Agent (Print Name, Title, and Address) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	ELLER, DALANE	
STREET ADDRESS	3006 23RD AVE. W BRADENTON FL	
CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> DELETE
NAME	BRAND, JAMES R	
STREET ADDRESS	7311 19TH AVENUE NW BRADENTON FL 34209	
CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> DELETE
NAME	LYNCH, WILLIAM	
STREET ADDRESS	2731 - 72ND ST. CT., W. BRADENTON FL	
CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> DELETE
NAME	CRUIKSHANK, DAVID	
STREET ADDRESS	4716 - 18TH AVE., W. BRADENTON FL	
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	MCGARY, LARRY	
STREET ADDRESS	6703 21ST AVE. TERR. W. BRADENTON FL	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Marge Vita	
1.3 STREET ADDRESS	507 51st St NW Bradenton, Fl 34209	
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Nelson H Jones	
5.3 STREET ADDRESS	2401 88th Ct NW Bradenton, Fl 34209	
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplementary 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 person or persons authorized 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 both, in affiliation with this filing.

SIGNATURE:

James R. Brand
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
James R. Brand, Assistant Secretary

5/1/96

941-792-1600

CR2E034 (12/95)