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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

'	1996	10 East 100 1	. Di.	VISION OF CO	RPORATION	SNC					
DOCUMENT # 367548 1. Corporation Name ENGLEWOOD GOLF REALTY, INC.			(5)								
ENGL	EWOOD GOLF	TICALITA INC.									
Principa! Place	of Business		Mailing Addre	988					(i iliki didil	BION BIEN BIDN	DIURI BIBIL RUUI
1 SOUTH GO ENGLEWOOD	Olfview Drive D FL 34223		1 SOUTH GOLFVIEW DRIVE ENGLEWOOD FL 34223								
								3. Date Incorporated or Qualified 07/28/1970	3a . D	ate of Last Ro 03/21/199	
2. Principal Pl	ace of Business	***************************************	2a. Mailing Ad	ddress				4. FEI Number		A	pplied For
21	4 - 4 -		26					59-1301738			lot Applicable
Suite, Apt.	#, etc.		Suite, Apt	. #, etc.				5. Certificate of Status Desired		•	Additional lequired
City & State)		Orty & Sta	ite		•		Election Campaign Financing Trust Fund Contribution		\$5.00	May Be
Zip	·	ountry	28] Ζφ		Country			8. This corporation has liability for	intangible		to Fees 199.032,
4	9. Name and A	ddress of Current F		29 30 30 epistered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent			
					81	Name		**************************************		- rigom	
THOMPSON, ANDREW M					82	Street	Address	P.O. Box Number is Not Accepta	ble'		
1 SOUTH GOLFVIEW DRIVE								editess (F.O. Dox Harrise is Not Neceptains)			
	wood, fl				83						
34223					84	City			F	85 Žķ	Code
or register familiar wi	th, and accept the	Sections by Union at in the State of Florida obligations of, Section	607.0505, Flore	da Statutes. ,	ine arrove i by the corp legisteria Age			isubmits this statement for the pudirectors. I hereby accept the appropriately	urpose or o nointment	as registered	agent. I ans
12.		OFFICERS AND D			13.		r	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTO	RS IN 12
TITLE	PD	0ED00E B 1D		DELETE	1 1 Till£					☐ Change	Addition
NAME	2519 COZUN	GEROGE R. JR.			1.2 NAMS	:					
STREET ADDRESS	TAMPA, FL (ADDRESS					
CITY-ST-ZIP TILE	SD			DELETE	1.4 OITY - S 2.1 THLE	51 - ZIF	-	The second section of the second seco		Change	Addition
NAME		GEORGE R SR.	L-1 '	, cccic	2 2 NAME					[_] Onlings	
STREET ADDRESS	1 S. GOLFVI				2.3 STREET	ADDRESS					
CITY - S3 - ZIP	ENGLEWOO	D, FL 00000			2.4 CHY - S	51 - ZIP					
TITLE	D			DELFTE	3 1 THILE		1			☐ Change	Addition
NAME		GEORGE R JR			3.2 NAMe						
STREET ADDRESS	2519 COZUN				33 STREE	I ADDRESS	•				
CITY-ST-ZiP	TAMPA, FL (3.4 CID - 5	ST - ZIF					T Addition
TITLE		ANDREW M.	Ц	DELFTE	4 1 1/11/					Change	Addition
NAME STREET ADDRESS	#1 S. GOLF				4.2 NAME	LAMMPEGE					
CITY-ST-ZIP	ENGLEWOO				4 3 STHEET 4 4 CITY - S						
TITLE				DELETE	5 1 T TLE	24 £11	ממען	**************************************		Change	Addition
NAME					5.2 NAME		VP2	C MADTENC		-	ΛΛ
STREET ADDRESS					5 3 STREET	ADDRESS		E C. MARTENS 2 KEATS DRIVE			
CITY-ST-ZIP			A		5.4 CHY - 9	ST - ZIP		ASOTA, FL 34241			
TITLE				DELETE	6 I TITLE					☐ Change	☐ Addition
NAME					6.2 NAME						
STREET ADDRESS					63 STREE	FADDRESS					

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)(s). 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 13 if changed for our an attachment with an address. SIGNATURE: SIGNATURE AND TYPED OF PRINTED JAME OF SIGNING OFFICER OR DIRECTOR TOMBON 2/15 911-474-5525