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 DOCUMENT #

390804

(3)

	ENGLE	wood G	OLF CONSTRUCTION	on Compan	Υ								
Principal Place of Business Mailing Address									1 105408 11070 (DIII 4070) (DIII DIIII)	ALDI DEDIL BARA	j e ududi ujuli uto f	I BIBILIUDI	
1 SOUTH GOLF VIEW DRIVE 1 SOUTH GOLF VIEW DRIVE ENDLEWOOD FL 34223 ENDLEWOOD FL 34223						E			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
<u> </u>	2. Principal Place of Business 2a. Mailing Address								11/04/1971				
—				-					4. FEI Number		<u> </u>	plied For t Applicable	
21	Suite, Apt.	#. etc		Suite, Apt. #, etc.					59-1369476		\$8.75		
22	outo, ripti	, 0.0.		—	27				5. Certificate of Status Desired		Fee Re		
1	City & State	Ð		City & State				6. Election Campaign Financing		\$5.00	·		
23	- 			28				Trust Fund Contribution		Added t			
	Zip	2ip Country			Zip Country				8. This corporation owes or has p	paid the cu	rrent year Inti	angible	
24		25 29				<u>) </u>		Personal Property Tax due June 30.				No	
<u></u>		9. Name	and Address of Current	Registered Ager	<u>nt</u>		T		10. Name and Address of New F	iegistered	Agent		
THOMPSON, GEORGE R.						81	Name						
1 SOUTH GOLFVIEW DRIVE						82	Street A	ddres	dress (P.O. Box Number is Not Acceptable)				
ENGLEWOOD FL						83			· · · · · · · · · · · · · · · · · · ·				
						"	1						
						84	City	•		FL	85 Zip (Code	
1	GNATURE		ions of Sections 607.0502 gent, or both, in the State of th, and accept the obligat or printed name of registered agent	- V .				(ation submits this statement for the 's board of directors. I hereby acc when reinstating)	purpose of the app	of changing its pointment as	s registered registered	
12			OFFICERS AND			13.			ADDITIONS/CHANGES TO OFF	ICERS AN			
TITI	LE	S) DELETE	1.1 TITLE					Change	Addition .	
NA	ME		son, george r			1.2 NAME	1						
STF	REET ADDRESS		LFVIEW DR			1.3 STREE	T ADDRESS						
	Y-ST-ZIP		VOOD, FL 00000		Loci etc	1.4 CITY-	ST-ZIP				110	T Admin	
ודוד		VD		L	DELETE	2.1 TITLE	1				Change	Addition	
NAI	···- 1		SON, GEORGE R, JR			2.2 NAME							
	REET ADDRESS		DZUMEL DR				T ADDRESS						
TITI	Y-ST-ZIP	PD	FL 00000		DELETE	2. 4 CITY - 3.1 TITLE	SI-ZIP				Change	Addition	
NAJ	-		SON, ANDREW M	L-1	CLETE	3.2 NAME	1				ET DIMENSO		
1	STREET ADDRESS 1 S GOLFVIEW OR				3.3 STREET ADDRESS		T ADDRESS						
1	Y-ST-ZIP		VOOD, FL 00000			3.4. CITY-	- 1						
TITE		6110061	10001 12 00000		DELETE	4.1 TITLE	"-"		· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Addition	
NAF	NAME				4. 2 NAME						_		
STR	EET ADDRESS					4.3 STREE	T ADDRESS						
1	Y-ST-ZIP					4.4 CITY-			:				
TIT					DELETE	5.1 TITLE			,		Change	Addition	
NAI	ME					5.2 NAME	1						

14. Thereby 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 supplierental 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 of 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Change

Addition

FILED

Apr 15 1998 8:00am

Secretary of State