

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Apr 28 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 743502 (7)**

1. Corporation Name  
**EASTPOINTE COUNTRY CLUB, INC.**

Principal Place of Business <b>13535 EASTPOINTE BLVD.                  PALM BEACH GARDENS FL 33418</b>	Mailing Address <b>13535 EASTPOINTE BLVD.                  PALM BEACH GARDENS FL 33418</b>
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3. Date Incorporated or Qualified <b>07/07/1978</b>	
4. FEI Number <b>59-1839098</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

**ED BRILL  
 13214 SAND GROUSE CT.  
 PALM BEACH GARDENS FL 33418**

10. Name and Address of New Registered Agent

81 Name <b>DONALD KUSS</b>	
82 Street Address (P.O. Box Number is Not Acceptable) <b>13861 SAND CRANE DRIVE</b>	
83	
84 City <b>PALM BEACH GARDENS FL</b>	85 Zip <b>33418</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *Donald Kuss* **PRESIDENT** DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>PRESIDENT/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>ED BRILL</b>		1.2 NAME <b>DONALD KUSS</b>	
STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>		1.3 STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>	
CITY-ST-ZIP <b>PALM BEACH GARDENS FL</b>		1.4 CITY-ST-ZIP <b>PBG FL 33418</b>	
TITLE <b>VPD</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>1ST VICE PRESIDENT/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>RICHARD ANTONOFF</b>		2.2 NAME <b>STEVEN KRAUS</b>	
STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>		2.3 STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>	
CITY-ST-ZIP <b>PALM BEACH GARDENS FL</b>		2.4 CITY-ST-ZIP <b>PBG FL 33418</b>	
TITLE <b>VPD</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>2ND VICE PRESIDENT/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SHERMAN, ETRA</b>		3.2 NAME <b>ELAINE HAMBURG</b>	
STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>		3.3 STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>	
CITY-ST-ZIP <b>PALM BEACH GARDENS FL</b>		3.4 CITY-ST-ZIP <b>PBG FL 33418</b>	
TITLE <b>SD</b>	<input type="checkbox"/> DELETE	4.1 TITLE <b>SECRETARY/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SY SILBERBERG</b>		4.2 NAME <b>ELAINE HAMBURG</b>	
STREET ADDRESS <b>13535 EASTPOINTED BLVD</b>		4.3 STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>	
CITY-ST-ZIP <b>PALM BEACH GARDENS FL</b>		4.4 CITY-ST-ZIP <b>PBG FL 33418</b>	
TITLE <b>TD</b>	<input type="checkbox"/> DELETE	5.1 TITLE <b>TREASURER/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>DONALD GANDERS</b>		5.2 NAME <b>STUART WEISSMAN</b>	
STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>		5.3 STREET ADDRESS <b>13535 EASTPOINTE BLVD</b>	
CITY-ST-ZIP <b>PALM BEACH GARDENS FL</b>		5.4 CITY-ST-ZIP <b>PBG FL 33418</b>	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Donald Kuss* (561) 626-6860

CR2E037 (10/97)