## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(0)

CALOOSA GOLF AND COUNTRY CLUB, INC.

**FILED** May 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						#1911 B1911 B1811 B1	I BH WEBH MEET
2115 CALOOSA BLVD. SUN CITY CENTER FL 33573		2115 CALOOSA BLVD. SUN CITY CENTER FL 33573		3. Date Incorporated or Qualified 04/10/1979			
					4. FEI Number	<del>                                      </del>	oplied For
2. Principal Place of Business 2a. Mailing Address					59-1971678		ot Applicable
21 26		h *	¬		5. Certificate of Status Desired		Additional equired
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00	<del></del>
22		27			Trust Fund Contribution		
I City & Stat	City & State City & State			7. Is this nonprofit corporation a homeowners association?			
Zip	Country	Zip Country			Yes No  8. This corporation owes or has paid the current year Intangible		
24	25	29 30	_ '		Personal Property Tax due June 30.		No
	9. Name and Address of Current				10. Name and Address of New Registers		<del></del>
				Name	BOURNE, KELLIE		
KITKO, FRANCES			82				
2115 CALOOSA BLVD.					tdress (P.O. Box Number is Not Acceptable) 2115 CALOOSA BLVD.		
SUN CITY CENTER FL 33573			63				
			64	City SU	N CITY CENTER	85 Zip	Code 573
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							
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, anti accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE & Selles. Bulke							
Signature, hyped or printed name of registered agent and title if applicable (NOTE: R  12. OFFICERS AND DIRECTORS				nt signature re	quired when reinetating). DATE ADDITIONS/CHANGES TO OFFICERS A		20 IN 12
TITLE	PD	X DELETE	13. 1.1 TITLE	- 11		Change	Addition
NAME	BURRELL, WILLIAM E.	_	1.2 NAME	S	TANFIELD, JOHN T.		
STREET ADDRESS	2001 EAST VIEW DRIVE		1.3 STREET	<sub>address</sub>  3	13 CALOOSA PALMS CT		
CITY-ST-ZIP	SUN CITY FL		1.4 CITY-ST		UN CITY CENTER, FL 33573		
TITLE	VPD	<b>≥</b> DELETE	2.1 TITLE		VPD	☐ Change	Addition
NAME	HEININGER, H.G.		2.2 NAME		TKINS, TOMMY V.		
STREET ADDRESS	2012 EAST VIEW DRIVE		2.3 STREET		801 WEDGE CT		1
CITY-ST-ZIP	SUN CITY FL	- Devete	2.4 CITY-S	T-ZIP S	UN CITY CENTER, FL 33573	[ ] At	1 4400-
TITLE	SD CLEADY MANICY M	☐ DELETE	3.1 TITLE		SD CLEADY NAMOV M	Change	Addition
NAME STREET ADDRESS	CLEARY, NANCY M. 709 OJAI AVENUE		3.2 NAME 3.3 STREET		CLEARY, NANCY M. 709 OJAI AVENUE		]
City-ST-ZIP	SUN CITY FL		3.4. CITY-S		SUN CITY CENTER, FL 33573		j
TITLE	D	X DELETE	4.1 TITLE	7.7	DON CLIT CENTER, FL 33573	Change	Addition
NAME	WHITTLE, WILLIAM E.		4. 2 NAME	E	SCHER, C. WILLIAM		•
STREET ADDRESS	311 CALOOSA WOODS LANE		4.3 STREET	ADORESS 6	532 FT DUQUESNA DR		
CITY-ST-ZIP	SUN CITY FL		4.4 CITY - ST	I-ZIP S	SUN CITY CENTER, FL 33573		
TITLE	D	DELETE	5.1 TITLE	Ī	-	☐ Change	Addition
NAME	VALENTINE, RAYMOND T.		5.2 NAME	1	NUXOLL, CHARLES		
STREET ADDRESS	1723 DEL WEBB BOULEVARD	W.	5.3 STREET		2326 DÉL WEBB BLVD. W.		
CITY-ST-ZIP	SUN CITY CENTER FL	TI DELETE	5.4 CITY-S1		SUN CITY CENTER, FL 33573		1229
TITLE	D CHITUMAN IOUN C	X DELETE	6.1 TITLE		) HINTON DYDOR	☐ Change	Addition
NAME CTREET ADORECC	SMITHMAN, JOHN G.		6.2 NAME		JLLNICK, BURT		Ì
STREET ADDRESS	1927 EAST VIEW DRIVE SUN CITY CENTER FL		6.3 STREET		735 WINTERBROOKE WAY		[
CITY-SY-ZIP	VOIT OUT OUTTEN FL		6.4 CITY-S1	ZIF	UN CITY CENTER, FL 33573		

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 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 of 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 only a tatachment with an address.

John T. Stanfield 4/30/98