

5-20-97 137576-C
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 May 20 1997 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 756091 (5)

1. Corporation Name
RIO PINAR COUNTRY CLUB, INC.



Principal Place of Business 6600 EL PRADO DR. ORLANDO FL 32825	Mailing Address 6600 EL PRADO DR. ORLANDO FL 32825-6228
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3. Date Incorporated or Qualified 01/28/1981	3a. Date of Last Report 04/25/1996
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	30

4. FEI Number 59-0835421	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**STRZALCO, JAMES
 589 LAGOON DR.
 OVIEDO FL 32765**

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME BRUHNKE, WALTER	
STREET ADDRESS 1435 BAYHEAD CT	
CITY-ST-ZIP ORLANDO FL	
TITLE TD	<input type="checkbox"/> DELETE
NAME BRENNEAN, PETE	
STREET ADDRESS 1940 COTSWOLD DR	
CITY-ST-ZIP ORLANDO FL	
TITLE PD	<input type="checkbox"/> DELETE
NAME LAWYER, IVAN	
STREET ADDRESS 4020 TUSCAWILLA RD S	
CITY-ST-ZIP GOLDENROD FL	
TITLE S	<input checked="" type="checkbox"/> DELETE
NAME CARRUTHERS, WARREN	
STREET ADDRESS 932 PINAR DR	
CITY-ST-ZIP ORLANDO FL	
TITLE D	<input type="checkbox"/> DELETE
NAME CALDWELL, ROBERT	
STREET ADDRESS 7800 SARANAC CT.	
CITY-ST-ZIP ORLANDO FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME CARTER, M C	
STREET ADDRESS 611 ENSENADA DR	
CITY-ST-ZIP ORLANDO FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME JIMMY MOORHEAD	
1.3 STREET ADDRESS 1907 COTSWOLD DR.	
1.4 CITY-ST-ZIP ORLANDO FL 32825	
2.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME VINCENT AMICO	
2.3 STREET ADDRESS 831 LONGHAVEN DRIVE	
2.4 CITY-ST-ZIP MAITLAND, FL 32751	
3.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME ROSEMARY SMITH	
3.3 STREET ADDRESS 8330 CARACAS AVENUE	
3.4 CITY-ST-ZIP ORLANDO FL 32825	
4.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME DON LANGSTON	
4.3 STREET ADDRESS 1523 ENSENADA DRIVE	
4.4 CITY-ST-ZIP ORLANDO FL 32825	
5.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME CRAIG WASHBURN	
5.3 STREET ADDRESS 8820 EL PRADO DR.	
5.4 CITY-ST-ZIP ORLANDO FL 32825	
6.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME STEVE YONGE	
6.3 STREET ADDRESS 8812 EL PRADO DR.	
6.4 CITY-ST-ZIP ORLANDO FL 32825	

14. I do 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.

3-17-97

CR2E037 (9/96)