

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**  
 05-06-2002 90060 024 \*\*\*158.75

REG-10 AV

**DOCUMENT # F22174**  
 1. Entity Name  
**ORANGE LAKE COUNTRY CLUB, INC.**

Principal Place of Business      Mailing Address  
**8505 W IRLO BRONSON MEM HWY**      **8505 W IRLO BRONSON MEM HWY**  
**KISSIMMEE FL 34747-8201**      **KISSIMMEE FL 34747-8201**  
**US**      **US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State  
 Zip      Country      Zip      Country

4. FEI Number **58-1434701**      Applied For  
 Not Applicable  
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CORPORATION INFORMATION SERVICES, INC.**  
**1201 HAYES STREET**  
**TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD</b> <b>WILSON, SPENCE</b> <b>1629 WINCHESTER ROAD</b> <b>MEMPHIS TN 38116</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>SWAN, CHARLES K III.</b> <b>8505 W IRLO BRONSON MEM HWY</b> <b>KISSIMMEE FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WEST, CAROLE WILSON</b> <b>1629 WINCHESTER RE</b> <b>MEMPHIS TN</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>WILSON, KEMMONS C JR</b> <b>1629 WINCHESTER RD</b> <b>MEMPHIS TN 28116</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPT</b> <b>BATT, WILLIAM R</b> <b>1629 WINCHESTER RD</b> <b>MEMPHIS TN 38116</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>WALLIN, R.E.</b> <b>1629 WINCHESTER RD</b> <b>MEMPHIS TN</b> <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition  (See Attached)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**  
 \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Brian T. Lowere, Sr. VP.      4-23-02 407.239.0000  
Date      Daytime Phone #

CR2E034 (9/01)

ATTACH # F22174/646627

**ORANGE LAKE COUNTRY CLUB, INC.**  
(FEI # 58-1434701)

**1629 Winchester Road**  
**Memphis, TN 38116**

Spence Wilson	D/C
Robert A. Wilson	D/VP
C. Kemmons Wilson, Jr.	D/VP
Betty Wilson Moore	D
Carole Wilson West	D
William R. Batt	VP/T
R.E. Wallin	S
Chip Crenshaw	Asst. S/Asst. T
Amy Jarreau	Asst. S
Gary McClain	Asst. T

**8505 West Irlo Bronson Memorial Highway**  
**Kissimmee, FL 34747**

Charles K. Swan, III	P/CEO
Brian T. Lower	Sr. VP/Asst. S
Thomas J. Gispanski	Sr. VP/CFO
Mike Stopperich	Sr. VP
Ron Juneman	Sr. VP
Robert L. Shaw	VP
Michael Thompson	VP
John Sutherland	VP
Lesley Greenslade	VP

D=Director, C=Chairman, P=President, CEO=Chief Executive Officer, CFO=Chief Financial Officer, Sr. VP=Senior Vice President, VP=Vice President, S=Secretary, T=Treasurer, Asst.=Assistant