

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**


**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91324 028 \*\*\*158.75

0597327 AV

**DOCUMENT # F61132**

1. Entity Name  
**ORANGE LAKE COUNTRY CLUB REALTY, INC.**



Principal Place of Business  
**8505 W IRLO BRONSON MEM HWY  
KISSIMMEE FL 34747  
US**

Mailing Address  
**8505 W IRLO BRONSON MEM HWY  
KISSIMMEE FL 34747  
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

4. FEI Number **62-1151716**

Applied For  
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICES COMPANY  
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

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>T</b> <b>PETTEY, JOHN III</b> <b>1629 WINCHESTER RD</b> <b>MEMPHIS TN</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MOORE, BETTY W</b> <b>1629 WINCHESTER RD</b> <b>MEMPHIS TN</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WEST, CAROLE WILSON</b> <b>1629 WINCHESTER RD</b> <b>MEMPHIS TN</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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Sr. VP</b> <b>Jim Petway</b> <b>8505 West Irlo Bronson Memorial Highway</b> <b>Kissimmee, FL 34747</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>(See Attached)</b>	<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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Brian T. Lower, Sr. VP** 4/23/03 407.239.0000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/0/02)

Attachment #  
80095423  

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FL 1132

**ORANGE LAKE COUNTRY CLUB REALTY, INC.**  
(FEI # 62-1151716)

**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	T
R.E. Wallin	S
Chip Crenshaw	Asst. S
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
Jim Petway	Sr. VP
Mike Stopperich	Sr. VP
John Sutherland	VP
Robert L. Shaw	VP
Debra Cohen	Asst. 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