## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

G04253

DOCUMENT #
1. Corporation Name WILLAGE OBEEN OOLE OLUD OF CADACOTA INC

VILLAGE	E GHEEN GOLF OLUB OF								
Principal Place o		Mailing Addres	•						
C/O JACK T BINSWANGER 3500 PEMBROOK DR			C/O JACK T BINSWANGER 3500 PEMBROOK DR						
SARASOTA FL		SARASOTA	SARASOTA FL 34239			3. Date Incorporated or Qualified 10/12/1982 3a. Date of Last Report 03/23/1995			
2. Principal Plac	pe of Business	2a. Mailing Add	dress			4. FEI Number 59-2225961		<b></b>	pplied For lot Applicable
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & Stat	е			Election Campaign Financing     Trust Fund Contribution		Added	May Be to Fees
Ζιρ 24	Country 25	Zip <b>29</b>	30	Country			□ No		199.032,
	9. Name and Address of Curren	t Registered Ager	nt			10. Name and Address of New F	legistered A	gent	
<u></u>	HOPP HOLF				lame				
3500 PE	NGER, JACK T MBROOK DR			82 8	treet Addres	ss (P.O. Box Number is Not Acceptat	ole)		
SARASU	TA FL 34239								
					City		FL		Code
or registers	ad according both lin the State of Flori	da. Such change wa	as authorized by t	above nan he corpora	ned corpora tion's board	tion submits this statement for the put of directors. I hereby accept the app	rpose of char jointment as i	nging its re registered	egistered office agent. I am
	n, and accept the obligations of Sect	ion 607.0505, Florid • 🕰	ia Statutes.	2-	2		2/6/	16	
SIGNATURE -	FACK T. BINSWANGE Signature: Typied or prested harms of registered agent	and little if applicable	NO1£ Regis	tered Agen? si	plature required		DIKTE		
12.	OFFICERS AN			13.		(ADDITIONS CHANGES TO OF			RS IN 12
TIFLE	PST		1	1 TITLE			L	] Change	☐ Madillari
NAME	BINSWANGER, JACK			1.2 NAME					
STREET ADDRESS	3500 PEMBROOK DR			1.3 STREET AD	ì				
C(1Y-S)-Z(F)	SARASOTA, FL 00000			1 4 CITY - ST - 7	'iP		<del></del>	Change	Addition
T-TLF	V	IJί		2 1 TITLE			L	J Orange	
NAME	TOALE, MICHAEL H		1	2 2 NAME					
STHEET ACCURESS	1761 MACKINTOSH BLVD			2.3 STREET AD	i				
CHY ST-ZIP	NOKOMIS FL			2.4 CITY - ST - 2	(P			Change	Addition
TITLE		Π,		3 1 THTLE	j				
NAME				3.2 NAME 3.3 STREET AL	nocce				
STREET ADORESS			L '						
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THE		. ب		4 2 NAME			_		_
NAME CANCUL ASIDEMAS				4.3 STREET AC	OBESS				
STREET ADDRESS				4.4 CITY - St -	1				
CITY ST-2IP TITLE				5 1 T-TLE				Change	☐ Addition
NAMe		<u>.                                    </u>		5 2 NAME					
NAME STREET ADDRESS				5 3 STREET AU	DRESS				
				54 CITY-ST-					
C 1Y-ST-ZP TIFLE		<u></u>		6 1 TITLE			[	Change	Addition
NAMÉ				6 2 NAME					
STREET ACORESS				63 STREET AL	DORESS				
				6.4 CHY-ST-	7IP				
CITY ST ZIP	I	with this filing is vol	Lintarily furnished	and does	not qualify fo	or the exemption stated in Section 11	9.07(3)(k), Flo	rida Statu	tes. I further

For pereby dentity that the information supplied with this tiling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4). 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 on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

2/6/96 941-922-9500