

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

CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J12669 (4)
 1. Corporation Name
METROWEST COUNTRY CLUB, INC.

Principal Place of Business 2100 S. Hiwassee Road Orlando, FL 32835-6307	Mailing Address 2100 S. Hiwassee Road Orlando, FL 32835-6307
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/05/1986	3a. Date of Last Report 06/28/1995
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2653699	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Zip	25. Country	29. Zip	30. Country
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent BUILDER, J. Lindsay, Jr. 390 N. Orange Avenue, Suite 1300 Orlando, FL 32801				10. Name and Address of New Registered Agent 81. Name J. Lindsay Builder, Jr. 82. Street Address (P.O. Box Number is Not Acceptable) 369 N. New York Avenue 83. City Winter Park FL 85. Zip Code 32789			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, for 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 607.0505, Florida Statutes.

SIGNATURE *J. Lindsay Builder, Jr.* J. Lindsay Builder, Jr. 4/30/96
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DELETE	1.1 TITLE	D/S/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACKSON, James B., Jr.	12 NAME	JACKSON, James B., Jr.
STREET ADDRESS	2100 S. Hiwassee Road	13 STREET ADDRESS	2100 S. Hiwassee Road
CITY-ST-ZIP	Orlando, FL 32835	14 CITY-ST-ZIP	Orlando, FL 32835
TITLE	DELETE	2.1 TITLE	D/P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BUILDER, J. Lindsay, Jr.	2.2 NAME	PUGHE, T. Andrew
STREET ADDRESS	390 N. Orange Avenue, Suite 1300	2.3 STREET ADDRESS	2100 S. Hiwassee Road
CITY-ST-ZIP	Orlando, FL 32801	2.4 CITY-ST-ZIP	Orlando, FL 32835
TITLE	DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AS	3.2 NAME	
STREET ADDRESS	GRINDSTAFF, Michael J.	3.3 STREET ADDRESS	
CITY-ST-ZIP	390 N. Orange Avenue, Suite 1300	3.4 CITY-ST-ZIP	
CITY-ST-ZIP	Orlando, FL 32801	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DELETE	4.2 NAME	
NAME	PD	4.3 STREET ADDRESS	
STREET ADDRESS	CHEBEIR, Camille	4.4 CITY-ST-ZIP	
CITY-ST-ZIP	2100 S. Hiwassee Road	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	Orlando, FL 32835	5.2 NAME	500001851305
TITLE		5.3 STREET ADDRESS	-06/05/96--01018--029
NAME		5.4 CITY-ST-ZIP	***200.00
STREET ADDRESS		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP		6.2 NAME	
TITLE		6.3 STREET ADDRESS	
NAME		6.4 CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James B. Jackson, Jr.* James B. Jackson, Jr. 4/30/96 407/299-8800
Signature and typed or printed name of signing officer or director Date Daytime Phone #