FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 03 1998 8:00am Secretary of State

Ę			# L71678 LLEY GOLF, INC.	3	(1)			
Pr	incipal Plac	e of Busines	G\$	Mailing A	ddress			T TERLINUL BIT I DERV LIGIE BLUIL IRREN INIT BURK BURK BURL BURK BURK BURK BURK BURK BURK BURK BURK
* ROBIN L. MCCOY 1995 CALUSA LAKES BLVD. NOKOMISA FL 34275 **ROBIN L. MCCOY 1995 CALUSA LAKES BLV NOKOMISA FL 34275 **NOKOMISA FL 34275						LVD.		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
2.	2. Principal Place of Business 2a. Mailing Address							05/08/1990 4. FEI Number Applied For
21	4 ilitterpean .	Idoy C. Dat.	11005	26	<u> </u>			Applied for
	Suffe, Apt. #, etc.			Suite, Apt. #, etc.				59-3026339 Not Applicable 5 Contilions of Status Pasient \$8.75 Additional
22	<u> </u>			27				5. Certificate of Status Desired Fee Required
	City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23				28				Trust Fund Contribution Added to Fees
	Z ip			Zip		Countr	У	8. This corporation owes or has paid the current year Intangible
24	24 25 29 29 9. Name and Address of Current Registered Agent					30		Personal Property Tax due June 30. Yes No
-				r nafistaten s	.gent	81	Name	10. Name and Address of New Registered Agent
MCCOY, ROBIN L 2045 TIMUCUA TR.								
						82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
	NOKOMIS FL 34275						1	.41.6
						ļ <u>.</u>		
						84	City	FL 85 Zip Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S 							re-named co by the corpor es.	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIG	NATURE							
12.	Signature, typed or printed name of registered agent and title if applica OFFICERS AND DIRECTORS				ole. (NO)	(NOTE: Registered Agent signature requi		
TITL		C		DELETE		1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAM	RICH, THOMAS A		HOMAS A	_		1.2 NAME		E orange E Manifest
STRE	TREET ADDRESS 1348 CLUBVIEW					1.3 STREE	T ADDRESS	
		VENICE	FL			1.4 CITY - ST - ZIP		
TITL	E	PT			DELETE	2.1 TITLE		☐ Change ☐ Addition
NAM			, Robin L			2.2 NAME		
STRE	EET ADDRESS 2045 TIMUCUA TR.		•	2.		2.3 STREE	T ADDRESS	
	-ST-ZIP	NOKOM	IS FL 34275			2. 4 CI1Y-	ST-ZIP	
MIL	- 1	S			DELETE	3.1 TITLE	ļ	☐ Change ☐ Addition
NAM	4446 001 0111 01 400		3.		3.2 NAME			
	ET ADDRESS						r address	:
TITLE	-ST-ZIP	VP	FL 34292	 	DELETE	3.4. CITY -	ST-ZIP	
NAM			T ROMAID M		LI DELETE	4.1 TITLE 4.2 NAME		☐ Change ☐ Addition
NAME BOBBETT, RONALD M STREET ADDRESS 1661 NEW SENECA TURNPIK			F		4.2 NAME	1		
	-ST-ZIP		TELES NY	_				
TITLE		V	TELEVITI		DELETE	4.4 CITY-5	51-212	Change Addition
NAM	E	ILER, NO	ORMAN			5.2 NAME	1	
STREET ADDRESS		758 VILLAGE CR. #208			5.3 STREET	ADDRESS	į	
CITY	-ST-ZIP	VENICE	FL 34292			5.4 CITY - S		
TITLE		A\$			☐ DELETE	6.1 TITLE		Change Addition
NAMI	E		'AK, davi d w			6.2 NAME		
STRE	ET ADDRESS		ATHER PL.			6.3 STREET	ADDRESS	
	-ST-ZIP		TA FL 34235			6.4 CITY - S	T-ZIP	

nereby 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. (941)