

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

FILED
Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L91081 (4)
 1. Corporation Name
RAVINES GOLF CORPORATION



Principal Place of Business 2932 RAVINES ROAD MIDDLEBURG FL 32068 US	Mailing Address 2932 RAVINES ROAD MIDDLEBURG FL 32068 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 07/30/1990
21 State, Apt. #, etc.	26 State, Apt. # etc.	4. FEI Number 59-3020951
22 City & State	27 City & State	Applied For Not Applicable
23 Zip	28 Zip	5. Certificate of Status Desired <input type="checkbox"/>
24 Country	29 Country	\$8.75 Additional Fee Required
30 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>
		\$5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent KEEFE, KENNETH M., JR 3300 BARNETT CENTER 50 N LAURA ST JACKSONVILLE FL 32202	10. Name and Address of New Registered Agent
	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	85 Zip Code

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, or 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 _____ (NOTE: Required Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KONDO, RYOICHI	1.2 NAME	
STREET ADDRESS	2932 RAVINES RD. MIDDLEBURG FL	1.3 STREET ADDRESS	
CITY- ST- ZIP	MIDDLEBURG FL	1.4 CITY- ST- ZIP	
TITLE	AVO <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SADO, HIROYUKI	2.2 NAME	
STREET ADDRESS	2932 RAVINES RD MIDDLEBURG FL	2.3 STREET ADDRESS	
CITY- ST- ZIP	MIDDLEBURG FL	2.4 CITY- ST- ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KONDO, RYOICHI	3.2 NAME	
STREET ADDRESS	2932 RAVINES RD. MIDDLEBURG FL	3.3 STREET ADDRESS	
CITY- ST- ZIP	MIDDLEBURG FL	3.4 CITY- ST- ZIP	
TITLE	CD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KONDO, MITSUYOSHI	4.2 NAME	
STREET ADDRESS	2932 RAVINES RD. MIDDLEBURG FL	4.3 STREET ADDRESS	
CITY- ST- ZIP	MIDDLEBURG FL	4.4 CITY- ST- ZIP	
TITLE	VPD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARASE, SUNAO	5.2 NAME	
STREET ADDRESS	2932 RAVINES RD. MIDDLEBURG FL	5.3 STREET ADDRESS	
CITY- ST- ZIP	MIDDLEBURG FL	5.4 CITY- ST- ZIP	
TITLE	SD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANA, CHININ	6.2 NAME	
STREET ADDRESS	2932 RAVINES RD. MIDDLEBURG FL	6.3 STREET ADDRESS	
CITY- ST- ZIP	MIDDLEBURG FL	6.4 CITY- ST- ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____

1/7/98 (904) 282-2201

CR2E034 (10/97)