

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # N08494 (9)

1. Corporation Name

BURNT STORE COUNTRY CLUB, INC.



Principal Place of Business	Mailing Address
301 MADRID BLVD PUNTA GORDA FL 33950	301 MADRID BLVD PUNTA GORDA FL 33950-7917

3. Date Incorporated or Qualified 04/02/1985	3a. Date of Last Report 02/29/1996
--	--

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	30 Country

4. FEI Number 59-2542237	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	
ROONEY, J MICHAEL 306 E. OLYMPIA AVENUE PUNTA GORDA FL 33950	

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP ☒ DELETE	1.1 TITLE	VP ☐ Change ☒ Addition
NAME	CRASSWELLER, JAMES	1.2 NAME	James Ford
STREET ADDRESS	751 MONACO DR	1.3 STREET ADDRESS	1222 Partridge Drive
CITY-ST-ZIP	PUNTA GORDA FL	1.4 CITY-ST-ZIP	Punta Gorda, FL 33950
TITLE	PD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	JACOBSEN, ROBERT	2.2 NAME	
STREET ADDRESS	2160 CHARLOTTE AMALIE CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	2.4 CITY-ST-ZIP	
TITLE	T ☒ DELETE	3.1 TITLE	Treasurer ☐ Change ☒ Addition
NAME	WILLIAMSON, LEONARD	3.2 NAME	Russell June
STREET ADDRESS	517 TOULOUSE DR	3.3 STREET ADDRESS	313 Segovia Drive
CITY-ST-ZIP	PUNTA GORDA FL	3.4 CITY-ST-ZIP	Punta Gorda, FL 33950
TITLE	S ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	BABITZKE, BETTY	4.2 NAME	
STREET ADDRESS	624 LACARUNA CT	4.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	4.4 CITY-ST-ZIP	
TITLE	CD ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	KNOX, DAVE	5.2 NAME	
STREET ADDRESS	4061 KING TARPON DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	5.4 CITY-ST-ZIP	
TITLE	CD ☒ DELETE	6.1 TITLE	Finance Chairman ☐ Change ☒ Addition
NAME	BRADLEY, NORMA	6.2 NAME	Robert Coleman
STREET ADDRESS	3950 SAN PIETRO CT	6.3 STREET ADDRESS	3812 Aves Island Court
CITY-ST-ZIP	PUNTA GORDA FL	6.4 CITY-ST-ZIP	Punta Gorda, FL 33950

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)

Denam Kemp