

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N11328** (4)

1. Corporation Name  
**PALM-AIRE COUNTRY CLUB AT SARASOTA, INC.**



Principal Place of Business: 5601 COUNTRY CLUB WAY SARASOTA FL 34243  
Mailing Address: 5601 COUNTRY CLUB WAY SARASOTA FL 34243

3. Date Incorporated or Qualified: 09/27/1985  
3a. Date of Last Report: 05/01/1995  
4. FEI Number: 59-2662531  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30  
City & State, Suite, Apt. #, etc., Zip, Country

9. Name and Address of Current Registered Agent: ABEL, BAND, RUSSELL, COLLIER, GORDON & PITCHFORD, 240 S PINEAPPLE AVE, SARASOTA FL 34236  
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code (FL)

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12	
TITLE: PD	NAME: CARROLL, JOHN L	1.1 TITLE: PRESIDENT	1.2 NAME: H. DAYLE BALLIETT
STREET ADDRESS: 5601 COUNTRY CLUB WAY	CITY-ST-ZIP: SARASOTA FL	1.3 STREET ADDRESS: 5601 COUNTRY CLUB WAY	1.4 CITY-ST-ZIP: SARASOTA, FL 34243
TITLE: VPD	NAME: BALLIETT, H DAYLE	2.1 TITLE: VICE PRESIDENT	2.2 NAME: ROBERT FLEDER
STREET ADDRESS: 5601 COUNTRY CLUB WAY	CITY-ST-ZIP: SARASOTA FL	2.3 STREET ADDRESS: 5601 COUNTRY CLUB WAY	2.4 CITY-ST-ZIP: SARASOTA, FL 34243
TITLE: TD	NAME: ROBINSON, KENNETH	3.1 TITLE: TREASURER	3.2 NAME: KENNETH ROBINSON
STREET ADDRESS: 5601 COUNTRY CLUB WAY	CITY-ST-ZIP: SARASOTA FL	3.3 STREET ADDRESS: 5601 COUNTRY CLUB WAY	3.4 CITY-ST-ZIP: SARASOTA, FL 34243
TITLE: SD	NAME: WARLOW, ELWOOD M (WOODY)	4.1 TITLE: SECRETARY	4.2 NAME: RICHARD MONTMEAT
STREET ADDRESS: 5601 COUNTRY CLUB WAY	CITY-ST-ZIP: SARASOTA FL	4.3 STREET ADDRESS: 5601 COUNTRY CLUB WAY	4.4 CITY-ST-ZIP: SARASOTA, FL 34243
TITLE: [ ] DELETE	NAME: [ ] DELETE	5.1 TITLE: [ ] Change [ ] Addition	5.2 NAME: [ ] Change [ ] Addition
STREET ADDRESS: [ ] DELETE	CITY-ST-ZIP: [ ] DELETE	5.3 STREET ADDRESS: 300001833783	5.4 CITY-ST-ZIP: -05/22/96--01017--004
TITLE: [ ] DELETE	NAME: [ ] DELETE	6.1 TITLE: [ ] Change [ ] Addition	6.2 NAME: [ ] Change [ ] Addition
STREET ADDRESS: [ ] DELETE	CITY-ST-ZIP: [ ] DELETE	6.3 STREET ADDRESS: ***61.25	6.4 CITY-ST-ZIP: 5-20-96

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

SIGNATURE: H. Dayle Balliett 04/24/96 941-355-9733  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)