FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N12778 (9)

1. Corporation Name

LOST CREEK VILLAGE AT VINES COUNTRY CLUB, INC.

Principal Place of Business:
12734 KENWOOD LANE
STE - 32
FT MYERS FL 33907
US

Mailing Address:
12734 KENWOOD LANE
STE - 32
FT MYERS L 33907
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/27/1985
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2763947 — 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status [ ] — $68.75 Supplemental Fee Not Required
8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes. [ ] Yes [X] No

2. Principal Place of Business (21) / Suite, Apt # (22) / City & State (23) / Zip (24) / Country (25)
2a. Mailing Address (26) / Suite, Apt # (27) / City & State (28) / Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

GELLES, ROBERT E
12734 KENWOOD LANE / STE - 32
FT MYERS FL 33907

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. [illegible]

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D	TITLE	D [X] Change [ ] Addition
NAME	POWELL, ED	NAME	Larson,Carl
STREET ADDRESS	19510 LOST CREEK DR	STREET ADDRESS	19635 Lost Creek Drive
CITY-ST-ZIP	FORT MYERS FL	CITY-ST-ZIP	Fort Myers, FL 33912
TITLE	DP	TITLE	[ ] Change [ ] Addition
NAME	DEANGELIS, GEORGE	NAME	
STREET ADDRESS	19605 LOST CREEK DR.	STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	CITY-ST-ZIP	
TITLE	DS	TITLE	[ ] Change [ ] Addition
NAME	DORAN, LOUISE	NAME	
STREET ADDRESS	19563 LOST CREEK DR	STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL	CITY-ST-ZIP	
TITLE	D	TITLE	[ ] Change [ ] Addition
NAME	SCHERER, JACK	NAME	
STREET ADDRESS	19629 LOST CREEK DR	STREET ADDRESS	
CITY-ST-ZIP	FORT MYRS FL	CITY-ST-ZIP	
TITLE	DVT	TITLE	[ ] Change [ ] Addition
NAME	WAINSCOTT, DUB	NAME	
STREET ADDRESS	19632 LOST CREEK DR.	STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	CITY-ST-ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. [illegible]

SIGNATURE: Louise Doran Louise Doran 4-25-95 9618265

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0016011