

**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 # **N26880** (7)  
1. Corporation Name:  
**ORANGE PARK COUNTRY CLUB OWNERS ASSOCIATION, INC**



Principal Place of Business: **2155 LOCH RANE BLVD ORANGE PARK FL 32073 US**  
Mailing Address: **2155 LOCH RANE BLVD ORANGE PARK FL 32073 US**

3. Date Incorporated or Qualified: **06/09/1988**  
3a. Date of Last Report: **03/01/1995**

21. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
<b>21</b>	<b>26</b> % Taylor Woodrow Communities	<b>59-2987832</b>	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<b>\$8.75 Additional Fee Required</b>
<b>22</b>	<b>27</b> 7120 S. Beneva Rd.	<input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
<b>23</b>	<b>28</b> Sarasota FL	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Zip	Zip		
<b>24</b>	<b>29</b> 34238		
Country	Country		
<b>25</b>	<b>30</b> USA		

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

~~BASS, KEITH E  
2155 LOCH RANE BLVD  
ORANGE PARK FL 32073~~

**81** Name: **Kathryn B. Clayton**  
**82** Street Address (P.O. Box Number is Not Acceptable):  
**% Taylor Woodrow Communities**  
**7120 S. Beneva Rd.**  
**83** City: **Sarasota** **FL** **85** Zip Code: **34238**

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: *Kathryn Clayton* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<del>PD</del> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>BASS, KEITH E</del>	1.2 NAME	
STREET ADDRESS	<del>2155 LOCH RANE BLVD</del>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<del>ORANGE PARK FL</del>	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, KEVIN	2.2 NAME	
STREET ADDRESS	2155 LOCH RANE BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL	2.4 CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DONALDSON, KIM	3.2 NAME	<b>SD Vicky Hulsberg</b>
STREET ADDRESS	2155 LOCH RANE BLVD	3.3 STREET ADDRESS	<b>2155 Loch Rane Blvd.</b>
CITY-ST-ZIP	ORANGE PARK FL	3.4 CITY-ST-ZIP	<b>Orange Park, FL 32073</b>
TITLE	TR <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKAN, STEVE	4.2 NAME	<b>Treasurer (only)</b>
STREET ADDRESS	2155 LOCH RANE BLVD	4.3 STREET ADDRESS	<b>Bakan, Steve</b>
CITY-ST-ZIP	ORANGE PARK FL	4.4 CITY-ST-ZIP	<b>7120 S. Beneva Rd.</b>
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	<b>600001843216</b>
STREET ADDRESS		6.3 STREET ADDRESS	<b>-05/28/96--01119--031</b>
CITY-ST-ZIP		6.4 CITY-ST-ZIP	<b>***61.25</b>

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 in an attachment with an address.

SIGNATURE: *Steve Bakan* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: **05 5 1996** Day/Mo/Yr

CR2E037 (12/95)