06301999-90007-005-$61.25-$61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 30, 1999 8:00 am
Secretary of State
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DOCUMENT # N33457

1. Corporation Name
HUNTERS RUN GOLF AND RACQUET CLUB, INC.

Principal Place of Business	Mailing Address
3500 CLUBHOUSE LANE BOYNTON BEACH FL 33436	3500 CLUBHOUSE LANE BOYNTON BEACH FL 33436

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 07/27/1989
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0136272 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GILDAN, HERBERT L. 1645 PALM BEACH LAKES BLVD., SUITE 1200 WEST PALM BEACH FL 33401	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 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	PD	☑ DELETE	1.1 TITLE	PD	☐ Change ☑ Addition
NAME	UDINE, ED		1.2 NAME	RUSKIN, ROBERT	
STREET ADDRESS	20 BRENTWOOD DR		1.3 STREET ADDRESS	17 WOODS LANE	
CITY-ST-ZIP	BOYNTON BEACH FL		1.4 CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	VPD	☑ DELETE	2.1 TITLE	VPD	☐ Change ☑ Addition
NAME	RUSKIN, BOB		2.2 NAME	LUXENBERG, HARVIN	
STREET ADDRESS	17 WOOD LN		2.3 STREET ADDRESS	45 WINDSOR LANE	
CITY-ST-ZIP	BOYNTON BEACH FL		2.4 CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	TD	☑ DELETE	3.1 TITLE	TD	☐ Change ☑ Addition
NAME	ZISMAN, BERNARD		3.2 NAME	IMMERMAN, LEW	
STREET ADDRESS	13A STRATFORD DR		3.3 STREET ADDRESS	32 CAMBRIDGE DRIVE	
CITY-ST-ZIP	BOYNTON BEACH FL		3.4 CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	SD	☑ DELETE	4.1 TITLE	SD	☐ Change ☑ Addition
NAME	ABRAMS, ANITA		4.2 NAME	GOLD, HERMAN	
STREET ADDRESS	31G SOUTHPORT LN		4.3 STREET ADDRESS	29 NORTHWOODS LANE	
CITY-ST-ZIP	BOYNTON BEACH FL		4.4 CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. I 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, with all other like empowered.

SIGNATURE: X SIGNATURE REQUIRED 6/25/99 561-737-4336
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #