

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 # N93000005809 (9)

1. Corporation Name

MID-FLORIDA BRITTANY CLUB, INC.



Principal Place of Business	Mailing Address
6745 17TH ST S ST PETERSBURG FL 33712 US	6745 17TH ST S ST PETERSBURG FL 33712 US

3. Date Incorporated or Qualified 12/21/1993	3a. Date of Last Report 05/01/1995
4. FEI Number 59-3230973	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

PITTMAN, JAMES W JR
6745 17TH ST S
ST PETERSBURG FL 33712

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. 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: *James W. Pittman, Jr.* **James W. Pittman, JR.** 2-11-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	DANGERFIELD, PHILIP
STREET ADDRESS	6210 DEW POINT LANE
CITY-ST-ZIP	TAMPA FL 33625
TITLE	<input type="checkbox"/> DELETE
NAME	V ALLEN, ALBERT
STREET ADDRESS	13326 STAR RD
CITY-ST-ZIP	BROOKSVILLE FL
TITLE	<input type="checkbox"/> DELETE
NAME	S PITTMAN, JAMES W
STREET ADDRESS	6745 17TH ST. S
CITY-ST-ZIP	ST.PETERSBURG FL 33712
TITLE	<input type="checkbox"/> DELETE
NAME	D SCHULTHEIS, CAHRLS
STREET ADDRESS	14505 SPELLMAN CT
CITY-ST-ZIP	SPRING HILL FL
TITLE	<input type="checkbox"/> DELETE
NAME	D MURRAY, MARGOT
STREET ADDRESS	3227 RIVER RD
CITY-ST-ZIP	GREEN COVE SPRINGS FL
TITLE	<input type="checkbox"/> DELETE
NAME	D MURRAY, JOHN
STREET ADDRESS	3227 RIVER RD
CITY-ST-ZIP	GREEN COVE SPRINGS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *James W. Pittman, Jr.* **James W. Pittman, JR.** 2-11-96 (813) 866-0036
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (12/95)