

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Jun 20 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000066939 (6)
 1. Corporation Name
S&K COUNTRY CLUB REALTY, INC.



Principal Place of Business 1000 CLINT MOORE RD., STE. 110 BOCA RATON FL 33487	Mailing Address 1000 CLINT MOORE RD., STE. 110 BOCA RATON FL 33487-2847
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/29/1995	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc.	26	27	28	4. FEI Number APPLIED FOR 65-0619095	Applied For Not Applicable
22 City & State	29	30	31	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	32	33	34	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Country	35	36	37	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name **JUDY MATTHEWS-GRAY**
 82 Street Address (P.O. Box Number is Not Acceptable)
1000 CLINT MOORE ROAD
 83 **SUITE 110**
 84 City **BOCA RATON** FL 85 Zip Code **33487**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Judy Matthews Gray* **JUDY MATTHEWS-GRAY** DATE **4/29/97**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	ENDELSON, KENNETH M	
STREET ADDRESS	1000 CLINT MOORE RD., STE. 110	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	SWARTZ, LORNA	
STREET ADDRESS	4180 WYCLIFF COUNTRY CLUB BLVD.	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	800002220378--2
1.3 STREET ADDRESS	-06/23/97--01164--006
1.4 CITY-ST-ZIP	***173.75 ***173.75
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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* DATE **4.30.97** **561.997.5760**

CR2E034 (9/96)