2001-UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000006366

DOCUMENT # P9900006366 1. Entity Name FLORIDA GOLF CLUB OF GAINESVILLE, INC.						Apr 23, 2001 8:00 am Secretary of State 04-23-2001 90046 040 ***150.00			
Principal Place 3030 LBJ FREE DALLAS TX 752		Mailing Address 3030 LBJ FREEWAY #700 DALLAS TX 75234 3. Mailing Address							
2. Principal F	Place of Business								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN TH	IS SPACE		
City & Stat	te	City & State	City & State			El Number 75-2806494		plied For at Applicable	
Zip Country		Zip	Zip Coun		5. Certificate of Status Desired		\$9.75 Additional		
			7. N	lame and Address of New Registers	·				
1201	PORATION SERVICE COMPANY HAYS STREET	,		Name Street Address (P.O. Box Number is Not Acceptable)					
TALL	AHASSEE FL 32301-2525						Zip Code	9	
Tax filing	Signature, typed or printed name of registered and oration is eligible to satisfy its Intang requirement and elects to do so, ria on back)	ible FILE NO' After MAY 1,	W!!! FEE 2001 Fee	IS \$150.0 will be \$5	50.00	10. Election Campaign Financing Trust Fund Contribution.	\$5.0	0 May Be to Fees	
11.	OFFICERS A	ND DIRECTORS	12.		AD	DITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARTZ, BERYL E 3030 LBJ FREEWAY #700 DALLAS TX 75234	Delete			Dou	GLAS LlowE	□ Change	Addition 6	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, JERRY 3030 LBJ FREEWAY #700 DALLAS TX 75234	Delete			S. THO	MAS LENSLEE	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PONER, KEVIN 3030 LBJ FRWY DALLAS TX 75234	Delete			RON	TAYLOR	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	Addition	

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF