FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

**DOCUMENT #** 

J26149

(1)

PINEBROOK-IRONWOOD GOLF CLUB, INC.

Principal Place of Business		Mailing Address				r rearring write train durar rearr 41810 (414) Billin Bill			
2201 4TH ST N. STE.#200 ST. PETERSBURG FL 33704		2201 4TH ST N. STE.#200 ST. PETERSBURG FL 33704							
						3. Date Incorporated or Qualified 07/29/1986	07/29/1986 05/01/19		
	ace of Business	2a. Mailing Address				4. FEI Number Applied For			Applied For
Suite, Apt. #, etc.		Suite Apt 4 etc						Not Applicable	
22		Suite, Apt. #, etc.	27]			5. Certificate of Status Desired			5 Additional
City & State	9	City & State				6. Election Campaign Financing			Required
23		28				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Ζip	Country	Zipi	Co	untry		8. This corporation has liability for it	ntangible		
24	25	29	30			Florida Statutes  Yes			
	9. Name and Address of Curren	t Registered Agent			r	10. Name and Address of New R	gistered	d Agent	
A1				81	Name				
CHEEZEM, J. MICHAEL					Street	t Address (P.O. Box Number is Not Acceptable)			
	1 STREET NORTH								
STE. 200				83					
oi. Pele	ERSBURG FL 33704			84	City	3.45		85 Z	p Code
44 Discount	Ab			J		rporation submits this statement for the purp	FI		•
familiar wit	ed agent, or both, in the state of Floric th, and accept the obligations of, Secti Signature, types or pointed name of registered agent	on 607.0505, Florida Statutes	s.	corpi	oration's	poard of directors. Thereby accept the appo	intment a	is registerec	l agent. I am
12.	OFFICERS AND		UTE Hagatere ■ 13.		I signature n	quired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE DE DO ANI	D DIDECTO	SOCIAL 10
TITLE	PD [] DELETE			1.1 MLE		AND HONS OF ANGES TO OTT	JL NO FON	Change	Addition
NAME	CHEEZEM, J. MICHAEL			IAME	ļ				
STREET ADDRESS	2201 4TH ST. N. STE. 200		1.3 \$	alkeet.	ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL		1.4 0	::11 - S	T-2IP				
TITLE	8	DELETE	2. 1 1	TITLE				Change	Addition
NAME	CAMPBELL, G. SPRING		22N	IAMÉ		COPELAND, G. SPRIN	10		
STREFT ADDRESS	2201 4TH ST. N. STE. 200		235	TREET	ADORESS				
CITY-SI-7IF	ST. PETERSBURG FL	** ***********************************	240	HY-S	T-ZIP				
TITLE	I I	DELETE	3 1 1	IIILE		TIVP		Change	Addition
NAME	ALLEN, ROBERT L.		32 N	AME		•	·	-	
STREET ADDRESS	2201 4TH ST. N. STE. 200		3 3, 5	STREET	ADDRESS				
CHTY-ST-ZIP	ST. PETERSBURG FL	F1 pg. gy		HY · S	I-ZIP		·- <b>-</b>		
TITLE		DELETE	4 1 7					Change	Addition Addition
NAME			4.2 N						
STREET ADORESS					ADDRESS				
CITY-ST-ZIP TITLE		□ DELETE	·	(TY - \$1	I - 71P				
NAME.			5 1 7					Change	Addition
STREET ADDRESS			5.2 N						
CITY-ST-ZIP					ADDRESS				
TITLE		DELETE		ITY-\$1	1-712			F3.6	F-3 4 1 1-15
NAME		L.J DUTER	6 1 l					Change	Addition
STREET ADDRESS			6.2 N						
CITY OF THE			6.3 \$	IREET :	ADDRESS				

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 offect as if made under oath; that I am an officer or director of the corporation or the receiver rustee 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96

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