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May 13 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA 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  
US6745 17TH ST S  
ST PETERSBURG FL 33712-5905  
US3. Date Incorporated or Qualified  
12/21/19933a. Date of Last Report  
03/05/1996

2. Principal Place of Business

2a. Mailing Address

21 P.O. Box 5010

26 P.O. Box 5010

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23 Spring Hill

28 Spring Hill

Zip

Country

Zip

Country

24 34611

25 US

29 34611

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

Alfred D. Makuc

82 Street Address (P.O. Box Number is Not Acceptable)

13375 Cortez Blvd.

83

84 City

Brooksville

85 Zip Code

FL 34613

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

*Alfred D. Makuc*  
Signature, typed or printed name of registered agent and file if applicable.

Alfred D. Makuc, Secy.

4/28/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	1.5 TITLE	1.6 NAME	1.7 STREET ADDRESS	1.8 CITY - ST - ZIP	1.9 TITLE	1.10 NAME	1.11 STREET ADDRESS	1.12 CITY - ST - ZIP	1.13 TITLE	1.14 NAME	1.15 STREET ADDRESS	1.16 CITY - ST - ZIP	1.17 TITLE	1.18 NAME	1.19 STREET ADDRESS	1.20 CITY - ST - ZIP												
P	Albert Allen	13326 Star Rd.	Brooksville, FL 34613	<input checked="" type="checkbox"/>	Change	<input type="checkbox"/>	Addition	V	Michael Eagan	2925 Redwood Ave.	Lakeland, FL 33803	<input checked="" type="checkbox"/>	Change	<input type="checkbox"/>	Addition	S	Alfred Makuc	13375 Cortez Blvd.	Brooksville, FL 34613	<input checked="" type="checkbox"/>	Change	<input type="checkbox"/>	Addition	D	Michael Wagoner	10396 Timbercrest Rd.	Spring Hill, FL 34608	<input checked="" type="checkbox"/>	Change	<input type="checkbox"/>	Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Alfred D. Makuc* **MAKUC** 4/28/97 352-596-5607  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone 0050939

CR2E037 (9/96)