FIL	E.	NOW:	FILING	FEE	<b>AFTER</b>	MAY	1ST	IS	\$550.	00
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**FILED** PROFIT FLORIDA DEPARTMENT OF STATE Feb 05 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (8)132308 THE EVERGLADES CLUB, INC. Principal Place of Business Mailing Address 356 WORTH AVE. 356 WORTH AVE. PALM BEACH FL 33480 PALM BEACH FL 33480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/29/1936 2a. Mailing Address 2. Principal Place of Business Applied For WORTH 26 Not Applicable 59-0198160 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BRANNEY, STEPHEN 356 WORTH AVE. Street Address (P.O. Box Number Is Not Acceptable) 82 PALM BEACH FL 33480 83 Zip Code 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 prolita with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE ☐ Change Addition TITLE 11 TITLE WILLIAM G. PANNILL NAME REYNOLDS, JOHN M., III 1.2 NAME 4 SOUTH LAKE TRAIL STREET ADDRESS 576 ISLAND DR. 1.3 STREET ADDRESS PALM BENCH, FLM. 33480 PALM BCH, FL 00000 CITY - ST- ZIP 1.4 CITY - ST-ZIP DELETE \_\_\_ Addition TITLE 2.1 TITLE Change NAME TERRY, ROBERT L. 2.2 NAME IST KINGS ROAD 2.3 STREET ADDRESS PALM BEACH FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE NAME ALBAN, JAMES C. 3.2 NAME 400 WORTH AVENUE STREET ADDRESS 3.3 STREET ADDRESS PALM BEACH, FL 0 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITI F DELETE 4.1 TITLE Change Addition TDAG CLAGGETT, WILLIAM 4, 2 NAME NAME STREET ADDRESS 235 CHILIAN 4.3 STREET ADDRESS PALM BEACH FL City-St-ZiP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition Addition TITLE 61 TITLE 62 NAME NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. 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 annual report or suppliemental 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

R2E034

REQUIRED

STREET ADDRESS CITY - ST - ZIP