

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90004 018 ***150.00

DOCUMENT # 197528

1. Corporation Name

PINE MEADOWS GOLF ESTATES INC

Principal Place of Business

17110 PINE MEADOWS GOLF COURSE RD.
EUSTIS FL 32726

Mailing Address

17110 PINE MEADOWS GOLF COURSE RD.
EUSTIS FL 32726

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/10/1956

4. FEI Number

59-0814269

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

CROAK, MICHAEL A.
14229 U.S. HIGHWAY 441
TAVARES FL 32778

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P Dir. Add: Jerry Siegel ☒ DELETE
NAME LIPPINCOTT, DONALD R. 2655 Lake Blvd.
STREET ADDRESS 13625 BERKSHIRE CT., Eustis, Fl. 32726
CITY-ST-ZIP GRAND ISLAND FL

TITLE VP Dir. Add: John T. Huntington ☒ DELETE
NAME MULHOLLAND, DENNIS
STREET ADDRESS 17350 EAST RD
CITY-ST-ZIP UMATILLA FL 32784 Eustis, Fl. 32726

TITLE S Dir. Add: Harold Church ☐ DELETE
NAME R K SCOVIL
STREET ADDRESS 22308 LIVE OAKS RANCH RD
CITY-ST-ZIP UMATILLA FL 32784 Eustis, Fl. 32726

TITLE T Dir. Add: John M. Cooke ☒ DELETE
NAME JOHN M. TENCH
STREET ADDRESS 1290 GRAY CT
CITY-ST-ZIP EUSTIS FL 32726 Mt. Dora, Fl. 32757

TITLE D ☐ DELETE
NAME TED M HENDERSON
STREET ADDRESS 35606 HWY 439
CITY-ST-ZIP EUSTIS FL 32726

TITLE D ☒ DELETE
NAME RICHARD M HARPER
STREET ADDRESS 437 LAURA LN
CITY-ST-ZIP MT. DORA FL 32757

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Pres. William M. Minnick ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1830 Hwy. 19A North
1.4 CITY-ST-ZIP Eustis, Fl. 32726

2.1 TITLE V-pres. Richard M. Harper ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 437 Laura Lane
2.4 CITY-ST-ZIP Mt. Dora, Fl. 32757

3.1 TITLE Sec. Richard K. Scovil ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 22308 Live Oaks Ranch Rd.
3.4 CITY-ST-ZIP Umatilla, Fl. 32784

4.1 TITLE Treas. Douglas Busch ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 36748 Sandy Lane
4.4 CITY-ST-ZIP Grand Island, Fl. 32735

5.1 TITLE Dir. Charles T. Wigle ☐ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS 35223 Harbor Shores Rd.
5.4 CITY-ST-ZIP Leesburg, Fl. 34788

6.1 TITLE Dir. Nina Atkins ☐ Change ☒ Addition
6.2 NAME
6.3 STREET ADDRESS 3065 Pine Cove Pl.
6.4 CITY-ST-ZIP Eustis, Fl. 32726

14. I 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, with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

4-21-99 352.367-7032

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