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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 311282 (8)

Mailing Address
18000 JOG ROAD
BOCA RATON FL 33496 US

FILED May 12 1998 8:00am Secretary of State

ROYAL PALM POLO - SPORTS CLUB, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/28/1966 2. Principal Place of Business 2a. Mailing Address 4. FEL Number Applied For 73-0760313 Not Applicable 21 26 Suite, Apl #, etc. 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 Ζip Ζıp Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DE MENDOZA, MARIO G III.ESQ 81 251 ROYAL PALM WAY, SIXTH FLOOR 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 83 84 City 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, typed or ponted name of registered agent and lifte if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition OXLEY, THOMAS E. 1.2 NAME 11798 GREYSTONE DRIVE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE RAINS, THOMAS E. 2.2 NAME NAME 1300 WILLIAMS CENTER TWR 2.3 STREET ADDRESS STREET ADORESS **TULSA OK** CITY-ST-ZIP 2.4 CITY-ST-ZIP AS DELETE Change Addition TITLE 3 1 TITLE KING, JEAN NAME 3 2 NAME 1305 WILLIAMS CENTER TWR STREET ADDRESS 3.3 STREET ADDRESS **TULSA OK** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE WHITE, COLLEEN 4. 2 NAME NAME 1305 WILLIAMS CENTER TWR 4.3 STREET ADDRESS STREET ADDRESS **TULSA OK** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE OXLEY, JOHN C 5.2 NAME NAME 1300 WILLIAMS CENTER TWR STREET ADDRESS 5.3 STREET ADDRESS **TULSA OK** CITY-\$1-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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

SIGNATURE:

JEAN KING

4-30-98