

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 511245

FILED
Jan 20, 2004
Secretary of State

Entity Name: WILLISTON GOLF AND COUNTRY CLUB CORPORATION

Current Principal Place of Business:

% ORTEGA AND COMPANY, P.A.
2307 DOUGLAS RD. SUITE 302
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

% ORTEGA AND COMPANY, P.A.
2307 DOUGLAS RD. SUITE 302
MIAMI, FL 33145

New Mailing Address:

FEI Number: 59-1686724 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERTOCH, CARL A
537 E PARK AVE
TALLAHASSEE, FL 32315 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: N. DE CUELLO, AIMEE
Address: 2025 CACIQUE ST - OCEAN PRK
City-St-Zip: SANTURCE, P.

Title: STD () Delete
Name: POU, AIMEE
Address: 9413 S.W. 21 TERRACE
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: CUELLO DE DE JUAN, MARIA M
Address: 28 FORTE STREET
City-St-Zip: SAN JUAN, PR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AIMEE N DE CUELLO

PD

01/20/2004

Electronic Signature of Signing Officer or Director

_____ Date