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Apr 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **593169** (6)

1. Corporation Name  
**HORSESHOE COVE RESORT, INC.**

Principal Place of Business <b>5100 60TH ST. E BRADENTON FL 34203</b>	Mailing Address <b>5100 60TH ST. E BRADENTON FL 34203-9548</b>
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3. Date Incorporated or Qualified <b>11/14/1978</b>	3a. Date of Last Report <b>04/26/1996</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number <b>59-1866974</b> Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**TURBEVILLE, JOHN B., JR.  
1005 44TH ST W  
BRADENTON FL 34209**

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			<b>FL</b>	

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 \_\_\_\_\_ (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	<b>DP GARROTT, JOE F 4808 W 9TH AVE BRADENTON FL</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>D C. M. Rowlett 4808 9th Ave W Bradenton, FL 34209</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS T WHITESSELL JR, I W 2023 74TH ST W BRADENTON FL</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>Change 464 Magellan Dr Sarasota, FL 34243</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVP FOGARTY, EUGENE 1201 6TH AVENUE, WEST BRADENTON FL</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<b>Change Addition</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BADEN, RAY 301-99TH STREET, N.W. BRADENTON, FL 00000</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<b>Change Addition</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP WHITESSELL, JR., I. W. 484 MAGELLAN DR SARASOTA, FL 00000</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<b>Change Addition D Wilber L. Nestor 2023 - 74th ST Circle NW Bradenton, FL 34203</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D TURBEVILLE, JR., JOHN B. 1005 44TH ST. W. BRADENTON, FL 00000</b>	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<b>Change Addition</b>

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

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-97 941-758-5335  
Date Daytime Phone

CR2E034 (9/96)