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Jan 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 596930

(8)

1. Corporation Name

GOLF HOST DEVELOPMENT, INC.

Principal Place of Business

36750 U.S. HWY. 19 N.
PALM HARBOR FL 34684

Mailing Address

PO BOX 1088
TARPON SPRINGS FL 34689-1088
US



3. Date Incorporated or Qualified

12/12/1978

3a. Date of Last Report

02/22/1996

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-1871601

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HILL, LEWIS H. I
FOLEY & LARDNER
1010 E. KENNEDY BLVD., BARNETT PL 3560
TAMPA FL 33602

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD
NAME FERREIRA, RICHARD S.
STREET ADDRESS 36750 US HWY 19 NORTH
CITY - ST - ZIP PALM HARBOR FL

☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VD
NAME WADSWORTH, STANLEY
STREET ADDRESS 4418 HIGHWAY 160 W
CITY - ST - ZIP HESPERUS CO

☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE SD
NAME HILL, LEWIS H III
STREET ADDRESS 1111 DUNBAR ST
CITY - ST - ZIP TAMPA FL

☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME WADSWORTH, BRENTON
STREET ADDRESS 1814 MARINER DR., #153
CITY - ST - ZIP TARPON SPRINGS FL

☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE C
NAME MCCORMICK, JAMES C.
STREET ADDRESS 2500 GRANDVIEW DR
CITY - ST - ZIP VINCENNES IN

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME ELLIS, WILLIAM
STREET ADDRESS 5983 WESTMINSTER COURT
CITY - ST - ZIP STEVENS POINT WI

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

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

Richard S. Ferreira, President

1/3/97 813-942-2000

Date

Daytime Phone #

CR2E034 (9/96)