

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 13 AM 11:18

DOCUMENT # **708769** (5)  
1. Corporation Name  
**PUNTA GORDA COUNTRY CLUB, INC.**

Principal Place of Business Mailing Address  
6100 DUNCAN ROAD 6100 DUNCAN ROAD  
PO BOX 1716 PO BOX 1716  
PUNTA GORDA FL 33951-1716 PUNTA GORDA FL 33951-1716

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

3. Date Incorporated or Qualified 3a. Date of Last Report  
**04/08/1965** **03/08/1994**  
4. FEI Number Applied For  
**59-1147044** 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  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**VOLZ, GAIL**  
**1833 NUREMBERG BOULEVARD**  
**PUNTA GORDA FL 33983**

10. Name and Address of New Registered Agent  
B1 Name **George Northcott**  
B2 Street Address (P.O. Box Number is Not Acceptable)  
**2814 MAGDALINA DRIVE**  
B3  
B4 City **PUNTA GORDA** FL B5 Zip Code **33950**

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 *George S. Northcott* **George Northcott, President** **3/7/95**  
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 PD  
NAME VOLZ, GAIL  
STREET ADDRESS 1833 NUREMBERG BOULEVARD  
CITY-ST-ZIP PUNTA GORDA FL  
TITLE VD  
NAME INSLEY, RICHARD  
STREET ADDRESS 109 MORNINGSTAR DR  
CITY-ST-ZIP PUNTA GORDA FL  
TITLE TD  
NAME KNORR, ROBERT  
STREET ADDRESS 850 NAPOLI LANE  
CITY-ST-ZIP PUNTA GORDA FL  
TITLE SD  
NAME SAUNDERS, DEBRA  
STREET ADDRESS 48400 FARABEE RD. BOX 163  
CITY-ST-ZIP PUNTA GORDA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE PD  Change  Addition  
1.2 NAME **NORTH COTT, GEORGE**  
1.3 STREET ADDRESS **2814 MAGDALINA DR**  
1.4 CITY-ST-ZIP **PUNTA GORDA, FL 33950**  
2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE **TD**  Change  Addition  
3.2 NAME **Johnston, AL**  
3.3 STREET ADDRESS **150 WEST RETTA ESPANOLA #226**  
3.4 CITY-ST-ZIP **PUNTA GORDA, FLORIDA 33950**  
4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addendum.

SIGNATURE: *George S. Northcott* **George Northcott** **3/7/95** **(813)639-3208**  
Signature and typed or printed name of officer or director. (Typed Name)