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Apr 28, 1999 8:00 am
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04-28-1999 90029 028 ****61.25

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 708924

1. Corporation Name

GREEN VALLEY COUNTRY CLUB, INC.

Principal Place of Business

W. HIGHWAY 50
P O BOX 120278
CLERMONT FL. 34712

Mailing Address

W. HIGHWAY 50
P O BOX 120278
CLERMONT FL. 34712



2. Principal Place of Business

21 14601 Green Valley Blvd.

Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

05/11/1965

4. FEI Number

59-1095634

Applied For

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

9. Name and Address of Current Registered Agent

APPOLLONI, ROBERT
8504 DORAL DR.
CLERMONT FL 34711

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Robert Appolloni

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Robert Appolloni 4-21-99

12. OFFICERS AND DIRECTORS

TITLE D DELETE

NAME JOHN LANGREHR
STREET ADDRESS 15031 GREEN VALLEY BLVD
CITY-ST-ZIP CLERMONT FL

TITLE D DELETE

NAME MCKINNEY, DONALD
STREET ADDRESS 14945 GREEN VALLEY BLVD
CITY-ST-ZIP CLERMONT FL

TITLE S DELETE

NAME GROSS, LUCILLE
STREET ADDRESS 15013 GREEN VALLEY BLVD
CITY-ST-ZIP CLERMONT FL 34711

TITLE T DELETE

NAME WEATHERS, T N
STREET ADDRESS 8516 FIRESTONE CIRCLE
CITY-ST-ZIP CLERMONT FL

TITLE D DELETE

NAME FRANK SCHMIDT
STREET ADDRESS 8601 SPYGLASS LOOP
CITY-ST-ZIP CLERMONT FL

TITLE D DELETE

NAME SWEET, JAMES
STREET ADDRESS 9000 VILLAGE GREEN BLVD
CITY-ST-ZIP CLERMONT FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME V. Pres.
1.3 STREET ADDRESS Rich Flynn
1.4 CITY-ST-ZIP 212 E Beach St.
Groveland, FL 34736

2.1 TITLE D Change Addition

2.2 NAME Frank C. Klein
2.3 STREET ADDRESS 14701 Green Valley Blvd.
2.4 CITY-ST-ZIP Clermont, FL 34711

3.1 TITLE Change Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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 D
6.3 STREET ADDRESS Houston Melton
6.4 CITY-ST-ZIP 14731 Green Valley Blvd.
Clermont, FL 34711

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Appolloni
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-99

Date

352-394-0632

Daytime Phone #

CR2E037 (11/98)