~ FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED May 03, 2004 8:00 am Secretary of State

1. Entity Name WILLISTON HIGHLANDS GOLF + COUNTRY CLUB ASSOCIATION, IN				05-03-2004 90699 009 ***1 50.00	
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WILLIST Suite, Apt.	TON HIGHLANDS C.C.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS	SPACE
City & State		City & State		4. FEI Number	Applied For Not Applicable
Zip 3269	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
April 100 m the second of the	term of the second contract of the contract of		A Section 1	7. Name and Address of Current Registers	ed Agent
	DO NOT W	RITE.	Street Address	M BARBER JR (P.O. Box Number is Not Acceptable) 28 1.557H CT	
	IN THIS SP	ACE			7:00-4-
			City WICC15	TON FI	Zip Code
	ions of registered agent.	the purpose of changing its r	egistered office or registe	red agent, or both, in the State of Florida. I am	familiar with, and accept
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State				9. Election Campaign Financing	\$5.00 May Be Added to Fees
				Condition Participation of the State of the Condition of	
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WILLISTON , FL 32696 12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352-528-2520 Daytime Phone #

FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 40976 3 1. Entity Name DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address Suite, Apt #. etc Suite. Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Asplied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE Zio Code 8. 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, I am familiar with, and access the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent and title January 1 - May 1 Fee is \$150.00 9. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. DIRECTOR NORM KREUTER TITLE TITLE NAME NAME 667 NE 151 ST TENRACE STAGET ADDRESS STREET ADDRESS WILLISTON, FL CITY-ST-ZIP CITY - ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TiTIC HAME MAME STREET ADDAESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIF TITLE IN THIS SPACE 71716 MALLE M2115 STREET ADDRESS STREET 400RESS CITY-ST-ZIP CITY-87-27F THILE THILE NAME MARKE STREET ADDRESS \$19861 4009688

12. In erectional form in mornishmen about each with solving does not qualify for it is exempt on stated in Section 119 CTU3. For da Statutes in character in a sport in successmental report is true and accurate and that must practice shall have the same legal effect as if make under of the comprant of other receives and that each execute this record as reduced by Chapter 607. Florida Statutes, and that implies attackment with an aptress, with all other like empoyered.

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1145/2 STREET 4DORESS

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

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Grager (ggan)

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