

FILE NOW: FILING FEE IS \$61.25

FILED
May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 710098 (5)
1. Corporation Name
BUCKHORN SPRINGS GOLF AND COUNTRY CLUB, INC.



Principal Place of Business P.O. BOX 1254 VALRICO FL 33594	Mailing Address P.O. BOX 1254 VALRICO FL 33594
--	--

3. Date Incorporated or Qualified 12/23/1965	4. FEI Number 59-1208774	Applied For <input type="checkbox"/> Not Applicable
---	-----------------------------	--

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
---	--

5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BRINK, JIM 3901 PADDLEWOOD CT BRANDON FL 33511

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
--

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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	BRINK, JAMES
STREET ADDRESS	3901 PADDLEWHEEL CT
CITY-ST-ZIP	BRANDON FL
TITLE	<input type="checkbox"/> DELETE
NAME	BRASWELL, HENRY
STREET ADDRESS	309 PALM KEY CR, #101
CITY-ST-ZIP	BRANDON FL
TITLE	<input type="checkbox"/> DELETE
NAME	BOCK, STEPHAN
STREET ADDRESS	3108 ROLLING ACRES PL
CITY-ST-ZIP	VALRICO FL
TITLE	<input type="checkbox"/> DELETE
NAME	JONES, JAMES
STREET ADDRESS	2704 CRESTFIELD DR
CITY-ST-ZIP	VALRICO FL
TITLE	<input type="checkbox"/> DELETE
NAME	MASON, STEVE
STREET ADDRESS	4949 WILLOW RIDGE TERRACE
CITY-ST-ZIP	VALRICO FL
TITLE	<input type="checkbox"/> DELETE
NAME	KIPLEY, LINDA
STREET ADDRESS	2604 MILLER ROAD
CITY-ST-ZIP	VALRICO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE _____ DATE 4/30/98

CR2E037 (10/97)

BOARD OF DIRECTORS - 1998

PRESIDENT	JOHN DERBY 2207 GREEN HILLS DR VALRICO, FL 33594	685-1382
VICE PRESIDENT	STEVE MASON 4949 WILLOW RIDGE TERRACE VALRICO, FL 33594	689-1638
TREASURER	JIM BRINK 3901 PADDLEWHEEL CT BRANDON, FL 33511	684-4734
SECRETARY	LINDA KIPLEY 2604 MILLER RD VALRICO, FL 33594	689-4360 276-5632
	JAMES JONES 2704 CRESTFIELD DR VALRICO, FL 33594	689-0910
	BARBARA GALENTINE 2602 SABLEWOOD DR VALRICO, FL 33594	654-8089
	JOHN WALMSLEY 2922 STARMOUNT DR VALRICO, FL 33594	684-4219
	MICK HOLM 2807 FAIRWAY VIEW DR VALRICO, FL 33594	662-9204
	LARRY LAPOINTE 2228 WILDWOOD HOLLOW DR VALRICO, FL 33594	681-6021