2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710098

FILED Mar 08, 2007 Secretary of State

Entity Name: BUCKHORN SPRINGS GOLF AND COUNTRY CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 2721 S MILLER ROAD VALRICO, FL 33594 **Current Mailing Address: New Mailing Address:** P.O. BOX 1254 VALRICO, FL 33595 FEI Number: 59-1208774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DONALD P. DECORT, P.A 115 SOUTH FIELDING STREET SUITE 3 TAMPA, FL 33606 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HOLM, OLAF M Name: Name: 2807 FAIRWAY VIEW DRIVE Address: Address: City-St-Zip: VALRICO, FL 33594 US City-St-Zip: Title: () Delete Title: () Change () Addition VIGUE, SCOTT D Name: Name: Address: 915 CENTERBROOK DRIVE Address: City-St-Zip: BRANDON, FL 633511 US City-St-Zip: Title: () Delete Title: () Change () Addition O'LOUGHLIN, SHARON A Name: Name: 3000 STARMOUNT DRIVE Address: Address: City-St-Zip: VALRICO, FL 33594 US City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: VOLINI, ROBERT A Name: CAMPIGLIA, FRANK M 2902 WEST SAN MIGUEL 6805 MONARCH PARK DRIVE Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: APOLLO BEACH, FL 33572 US Title: () Delete Title: (X) Change () Addition ARNOFF, ALAN E ARNOFF, ALAN E Name: Name: 2620 MANOR OAK DRIVE 2620 MANOR OAK DRIVE Address: Address: City-St-Zip: VALRICO, FL 33594 City-St-Zip: VALRICO, FL 33594 US Title: () Delete Title: (X) Change () Addition PYSE, KEN BOLEN, JACK Name: Name: Address: 4322 GLENDON PLACE Address: 2217 BOXWOOD WAY VALRICO, FL 33594 City-St-Zip: BRANDON, FL 33511 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLAF M. HOLM PRES 03/08/2007