

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 720031 (4)
1. Corporation Name
ROLLING GREEN GOLF VILLAGE ASSOCIATION, INC.



Principal Place of Business Mailing Address
2591 GOLF COURSE DR. 2591 GOLF COURSE DR.
SARASOTA FL 34234 SARASOTA FL 34234

3. Date Incorporated or Qualified 01/11/1971 3a. Date of Last Report 04/07/1995
4. FEI Number 59-1619412 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOOD, JOHN J.
2160 GOLF COURSE DRIVE
SARASOTA FL 34234

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	FOSSETT, ROBERT	1.2 NAME	Kenneth Mayo
STREET ADDRESS	2736 GOLF COURSE DR	1.3 STREET ADDRESS	2682 Golf Course Dr.
CITY-ST-ZIP	SARASOTA FL 34234	1.4 CITY-ST-ZIP	Sarasota, FL 34234
TITLE	VD	2.1 TITLE	VD
NAME	WOODS, JACK	2.2 NAME	Ronald Edwards
STREET ADDRESS	2610 GOLF COURSE DRIVE	2.3 STREET ADDRESS	2614 Golf Course Dr.
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Sarasota, FL 34234
TITLE	SD	3.1 TITLE	TD
NAME	WIEGAND, JANET	3.2 NAME	Elizabeth J. Murray
STREET ADDRESS	2585 GOLF COURSE DRIVE	3.3 STREET ADDRESS	2744 Golf Course Dr.
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	Sarasota, FL 34234
TITLE	D	4.1 TITLE	D
NAME	FEENEY, JACK	4.2 NAME	Ralph Barden
STREET ADDRESS	2747 GOLF COURSE DR.	4.3 STREET ADDRESS	2568 Golf Course Dr.
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	Sarasota, FL 34234
TITLE	D	5.1 TITLE	
NAME	KAUFMAN, PHILIP	5.2 NAME	
STREET ADDRESS	2639 GOLF COURSE DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34234	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	MILLER, MARY JANE	6.2 NAME	
STREET ADDRESS	2543 GOLF COURSE DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	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)(k), 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:

Elizabeth J. Murray, Treasurer

2-24-96 941-355-7304

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)