

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90107 050 ****61.25

DOCUMENT # 720866

1. Corporation Name

MARIANNA GOLF ASSOCIATION, INC.

Principal Place of Business

3309 CAVERNS ROAD
MARIANNA FL 32446

Mailing Address

3309 CAVERNS ROAD
MARIANNA FL 32446



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

05/03/1971

4. FEI Number

NOT APPLICABLE

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

BRENDEMUEHL, R. H.
2978 SPRING STREET
MARIANNA FL 32446

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME WISE, GREG
STREET ADDRESS 4559 RED OAK TRACE
CITY-ST-ZIP MARIANNA FL

TITLE D ☒ DELETE

NAME GOODSON, JAMES
STREET ADDRESS 2883 WILDWOOD CIRCLE
CITY-ST-ZIP MARIANNA FL

TITLE STD ☐ DELETE

NAME BRENDEMUEHL, R.H.
STREET ADDRESS 2978 SPRING STREET
CITY-ST-ZIP MARIANNA FL

TITLE D ☒ DELETE

NAME HANSEL, GLINDA
STREET ADDRESS 4705 THE OAKS DRIVE
CITY-ST-ZIP MARIANNA FL

TITLE D ☐ DELETE

NAME CUNNINGHAM, MONTE
STREET ADDRESS 5488 NINTH
CITY-ST-ZIP MALONE FL

TITLE PD ☒ DELETE

NAME LARAMORE, DEAN
STREET ADDRESS 4859 DONNA DR
CITY-ST-ZIP MARIANNA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D ☒ Change ☐ Addition

Gregg, Harold G
4614 Bales Dr.
MARIANNA, FL 32446

☐ Change ☐ Addition

D ☒ Change ☐ Addition

Breyfogle, Betty
3393 Fish Hatchery Rd.
MARIANNA, FL 32446

P ☒ Change ☐ Addition

V ☒ Change ☐ Addition

Harris, Jason
2999 Caledonia St.
MARIANNA, FL 32446

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: *[Signature]*

3-15-99 (850) 482-3911

CR2E037 (11/98)

7 20866
234616 90107.50

Title D
Name Hamm, Joseph G., Jr.
Street 3150 Fourth St.
Address
City, St.-Zip Marianna, FL 32446