No COI	ON OR BEFORE 8/7/96: \$61.25 (IF DISS ONPROFIT RPORATION UAL REPORT 1996	FLORIDA DEPAI Sandra Secreta	RTMENT OF STATE B. Mortham ary of State CORPORATIONS		
DOCU 1. Corporation	MENT # 74316	68 (7)			
BEAG	CHCOMBER CLUB, INC.		Ξ ,		
Principal Plac	ce of Business	Mallian Adda			
290 5TH AVI	E. \$.	Mailing Address 290 5TH AVE. S.		1 144011 14410 11110 11110 11110	ar sam arati ardii dibil oleli Eleli Olfii (65)
NAPLES FL	33940	NAPLES FL 33940			
6 D/				3. Date Incorporated or Qualified 06/08/1978	3a. Date of Last Report 06/21/1995
21	Place of Business	2a. Mailing Address 26		4. FEI Number 59-1498343	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for i	ntangible tax under s. 199.032
24	25 9. Name and Address of Curren	29 nt Registered Agent	30	Florida Statutes 10. Name and Address of New Re	Yes X No
FLA. S	SUNBELT PROPERTIES, INC		81 Name		
290 51	TH AVE. S. ES FL 33940		<u> </u>	dress (P.O. Box Number is Not Acceptable	le)
IWILL	:3 FL 33940		83		
11. Pursuant	to the provisions of Sections 617 050	2 and 617 1508 Florida Statute	84 City		FL 85 Zip Code
office or r	egistered agent, or both, in the State	e and biri 1000, righted statute			
agent. i a	m familiar with, and accept the obliga	of Florida. Such change was a trions of, Section 617.0503, Flo	es, the above-named corp uthorized by the corporal rida Statutes	poration submits this statement for the put tion's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE A	Signature hyped or printed name of registered ager	nt and title if applicable (NOT	es, the above-named corporal rida Statutes E. Registered Agent signature requirements.	poration submits this statement for the pution's board of directors. I hereby accept	prose of changing its registered the appointment as registered
SIGNATURE &	1 Mound 11 11 200	NOT DIRECTORS	E. Registered Agent signature requ.	Le le	1/96 DATE/
SIGNATURE , 12. TITLE NAME	Signature Typed or printed name of registered age: OFFICERS AND PD BARTTER, ROWLAND	nt and title if applicable (NOT	E: Registered Agent signature requ	ulred when reinstating)	DATE
SIGNATURE A	Signature hyped or printed name of registered agen OFFICERS ANI	NOT DIRECTORS	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ulred when reinstating)	1/96 DATE/
SIGNATURE A 12. THE NAME STREET ADDRESS CITY-S1-ZIP TITLE	Signature Typed or printed name of registered ager OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD	NOT DIRECTORS	E Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME	ulred when reinstating)	1/96 DATE/
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-S1-ZIP	Signature hyped or printed name of registered ager OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL	nt and title if applicable (NOT D DIRECTORS DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ulred when reinstating)	DATE / DATE / DERS AND DIRECTORS IN 12 Change
SIGNATURE A 12. THE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature hyped or printed name of registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY	nt and title if applicable (NOT) D DIRECTORS DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - 2IP 2.1 TITLE	ulred when reinstating)	DATE / DATE / DERS AND DIRECTORS IN 12 Change
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature hyped or printed name of registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD	nt and title if applicable (NOT D DIRECTORS DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 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	ulred when reinstating)	DATE / DATE / DERS AND DIRECTORS IN 12 Change
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature hyped or printed name of registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH	nt and title if applicable (NOT) D DIRECTORS DELETE DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 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	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature Typed or printed name of registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL	D DIRECTORS DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 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	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature Typed or printed name or registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH	nt and title if applicable (NOT) D DIRECTORS DELETE DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	Signature Typed or printed name or registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303	D DIRECTORS DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 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	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature Typed or printed name or registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH	DELETE DELETE DELETE	E Registered Agent signature required. 13. 1.1 TITLE 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	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signakor hyped or printed name or registered ager OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E.	D DIRECTORS DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 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	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signakor hyped or printed name or registered ager OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E. 6601 S.W. 122ND AVENUE	DELETE DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 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	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signakor hyped or printed name or registered ager OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E.	DELETE DELETE DELETE DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 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	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signalize hyped or printed name or registered ager OFFICERS AND PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E. 6601 S.W. 122ND AVENUE MIAMI FL D CALTRIDER, CARROLL E	DELETE DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signalize hyped or printed name or registered ager OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E. 6601 S.W. 122ND AVENUE MIAMI FL D CALTRIDER, CARROLL E 2021 OLD VALLEY RD	DELETE DELETE DELETE DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	ulred when reinstating)	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP 14. L Q DARRED	Signature Typed or printed name of registered ager OFFICERS AND PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E. 6601 S.W. 122ND AVENUE MIAMI FL D CALTRIDER, CARROLL E 2021 OLD VALLEY RD STEVENSON MD	D DIRECTORS DELETE DELETE DELETE DELETE DELETE	E Registered Agent signature requ. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE 6.3 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-2IP 6.1 TITLE 6.3 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-2IP	ared when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE/ DERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition Addition Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signake hyped or printed name or registered age: OFFICERS ANI PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E. 6601 S.W. 122ND AVENUE MIAMI FL D CALTRIDER, CARROLL E 2021 OLD VALLEY RD STEVENSON MD V certify that the information supplied tify that the information indicated on	DELETE DELETE DELETE DELETE DELETE With this filing is voluntarily further and the convertions or the result for the resu	E Registered Agent signature requ. 13. 1.1 TITLE 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 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.5 STREET ADDRESS 5.5 CITY-ST-ZIP 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP 6.5 STRE	ulred when reinstating)	Change Addition
SIGNATURE A 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature Typed or printed name or registered ager OFFICERS AND PD BARTTER, ROWLAND 578 BROAD AVE S NAPLES FL VD POWER, JOHN 600 MADISON AVE NEW YORK NY TD CORKRAN, SEWELL 213 NINTH AVENUE, SOUTH NAPLES FL SD WESEMEYER, RUTH 34165 RT. 303 GRAFTON OH D SCHAIBERGER, DR. G. E. 6601 S.W. 122ND AVENUE MIAMI FL D CALTRIDER, CARROLL E 2021 OLD VALLEY RD STEVENSON MD y certify that the information supplied tify that the information indicated on t er oath; that I am an officer or director imme appears in Block 12 or Block 13 if	DELETE DELETE DELETE DELETE DELETE With this filing is voluntarily further and the convertions or the result for the resu	E Registered Agent signature requ. 13. 1.1 TITLE 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 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.5 STREET ADDRESS 5.5 CITY-ST-ZIP 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP 6.5 STRE	lifty for the exemption stated in Section 11 and accurate and that my signature shall d to execute this report as required by Chi.	Change Addition