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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

746139

(5)

BEACON WOODS GOLF CLUB, INC.

Principal Place of Business

Mailing Address

13140 CLOCK TOWER PKWY BAYONET PT FL 34667 13140 CLOCK TOWER PKWY BAYONET PT FL 34687-2115 FILED
Jan 21 1997 8:00am
Secretary of State



BAYONET PT FL 34667		BAYONET PT FL 34687-2115		
				3. Date Incorporated or Qualified 3a. Date of Last Report 03/06/1979 01/29/1996
2. Principal Pla		2a. Mailing Address		4. FEI Number Applied For System 4. FEI Number Applied For Applied
	Clock Tower Pkwy	<u> </u>	Tower Pl	N 7 Inut Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State	et Point. FL	City & State Bayonet Poi	nt FI.	6. Election Campaign Financing \$5.00 May Be
23 Bayon Zip	Country	Zip Bayonet Pol	Country	Trust Fund Contribution Added to Fees
24 34667		29 34667 34	- n ´	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
24 3 1007	9, Name and Address of Current I		1	Florida Statutes 44 Yes No 10. Name and Address of New Registered Agent
04 3				
Cli				Clinton Thaxton
DAVIS, WILLMER J 12106 CLEARBROOK LANE 12 Street Addre			Address (P.O. Box Number is Not Acceptable)	
BAYONET POINT FL 34667				25 Sandy Trail Lane
BATONE	I I ONTI FL 3400/			
			84 City	son FL 85 Zip Code 34667
11 Purpuant to	the provisions of Sections 617.0503	and 617 1609 Florida Statutos	Huds	
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 carporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503 Fyrida Statutes.				
			Statutes.	<i>II</i> .77
SIGNATURE _	Clinton Thaxton. Signature, typed or profiled name of registered agent a	Treasurer Company (NOTE R	Registered Agent signature	100 DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	President
NAME	MULLER, EDWARD R.		1.2 NAME	Eugene N. Eden
STREET ADDRESS	12604 CASTLEBERRY COURT		1.3 STREET ADDRESS	7701 Sundown Court
CITY-ST-ZIP	BAYONET POINT FL		1.4 CITY-ST-ZIP	Bayonet Point. FL 34667
TITLE	VD	DEL e te	2.1 TITLE	Vice President Change Addition
NAME	EDEN, EUGENE N.		2.2 NAME	Frank Grasso
STREET ADDRESS	7701 SUNDOWN COURT		2.3 STREET ADDRESS	12107 Buttonwood Row
CITY-ST-ZIP	BAYONET POINT FL		2. 4 CITY - ST - ZIP	
TITLE	SD	☐ DELETE	3.1 TITLE	Bayonet Point. FL 34667 Secretary Change Addition
NAME	LANGROCK, PAULA		3.2 NAME	Edward R. Muller
STREET ADDRESS	12902 PEBBLE BEACH CIRCLE		3.3 STREET ADDRESS	12604 Castleberry Court
CITY-ST-ZIP	BAYONET POINT FL		3 4. CITY-ST-ZIP	Bayonet Point, FL 34667
TITLE	TD	☐ DELETE	4.1 TITLE	Treasurer Change Addition
NAME	THAXTON, CLINTON		4.2 NAME	Clinton Thaxton
STREET ADDRESS	12825 SANDY TRAIL LANE		4.3 STREET ADDRESS	12825 Sandy Trail Lane_
CITY-ST-ZIP	HUDSON FL		44 CITY-ST-ZIP	Bayonet Point, FL 34667
TITLE	D	DELETE	51 TITLE	Director □ Change □ Addition
NAME	GRASSO, FRANK		52 NAME	Paula Langrock
STREET ADDRESS	12107 BUTTONWOOD ROW		5.3 STREET ADDRESS	12902 Pebble Beach Circle
CITY - ST - ZIP	BAYONET PT. FL.		5 4 City-St-ZIP	Bayonet Point, FL 34667
TITLE	D	DELETE	6.1 TIYLE	Director ☐ Change ☐ Addition
NAME	FAUST, A. CHARLES		6.2 NAME	Charles A. Faust
STREET ADDRESS	8205 GOLF CLUB CT.		6.3 STREET ADDRESS	
CITY - ST - ZIP	BAYONET POINT FL		6.4 CITY-ST-ZIP	8205 Golf Club Court Bayonet Point. FL 34667

14. I do hereby certify that the information supplied with this filling 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 3 or on an attachment with an address.

SIGNATURE:

1

1.7, 1997

813 868- 7673