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NONPROFIT CORPORATION ANNUAL REPORT **1999**

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

DOCUMENT # 746139

1. Corporation Name
BEACON WOODS GOLF CLUB, INC.

* 3 7 3 5 7 1 *
373571 - 90058 - 46

Principal Place of Business	Mailing Address
13140 CLOCK TOWER PKWY BAYONET PT FL 34667	13140 CLOCK TOWER PKWY BAYONET PT FL 34667

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 03/06/1979	
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1892679	Applied For ☐ Not Applicable ☐
City & State 23	City & State 28	5. Certificate of Status Desired ☐	$3.75 Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

~~LANGROCK, PAULINE EX~~
~~12902 PEBBLE BCH CIR~~
~~BAYONET PT FL 34667~~

10. Name and Address of New Registered Agent

81 Name: Mary Lou Simonelli
82 Street Address (P.O. Box Number is Not Acceptable): 8538 Berkley Drive
83
84 City: Hudson FL 85 Zip Code: 34667

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: Mary Lou Simonelli, secretary — DATE: April 21, 1999
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P THAXTON, CLINT 12825 SANDY TRAIL LN BAYONET POINT FL 34667	XX DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P William A. Donati 12813 Cedar Ridge Drive Hudson, FL 34667	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP EDEN, EUGENE 7701 SUNDOWN CT BAYONET POINT FL 34667	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP William Otsuki 8209 Golf Club Court Bayonet Point, FL 34667	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LANGROCK, PAULINE 12902 PEBBLE BCH CIR BAYONET POINT FL 34667	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S Mary Lou Simonelli 8538 Berkley Drive Hudson, FL 34667	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BROSE, RICHRD E 12802 IRONWOOD CIR BAYONET POINT FL 34667	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T Robert E. Barry 8013 Valley Stream Lane Bayonet Point, FL 34667	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HANAHOE, ~~RICHARD~~ Girard C. 8509 FOREST GLADE DR HUDSON FL 34667	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D Richard Smith 8687 Ashbury Drive Hudson, FL 34667	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TURNBULL, CONSTANCE 12713 CHARTER OAK WAY BAYONET POINT FL 34667	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D Jack Whitmore 8602 Lincolnshire Drive Bayonet Point, FL 34667	☐ Change XX Addition

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] **REQUIRED** — 4-01-99 — (727) 868-7673
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037-(11/98)