

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

400001771504
-04/08/96--01002--037
***61.25

DOCUMENT # 750766 (8)

1. Corporation Name

FOUR SEASONS COMMUNITY CLUB, INC.

Principal Place of Business

13225 101ST STREET S.E.
LARGO FL 34643

Mailing Address

13225 101ST STREET S.E.
LARGO FL 34643

3. Date Incorporated or Qualified
01/25/1980

3a. Date of Last Report
04/12/1995

2. Principal Place of Business

2a. Mailing Address

21 13225 - 101st S/E

26 13225 - 101st St., S/E

4. FEI Number
59-2873509

Applied For

☒ Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

23 Largo, Florida

28 Largo, Florida

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 34643

25 Pinellas

29 34643

30 Pinellas

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

O'BRIEN, POLLIE
13225 SE 101 ST
#486
LARGO FL 34643

81 Name Gurn, Betty

82 Street Address (P.O. Box Number is Not Acceptable)

13225 - 101st St., S/E

83 #497

84 City Largo

FL

85 Zip Code 34643

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)

4/1/96

12. OFFICERS AND DIRECTORS

11 TITLE Pres. Betty Gurn ☐ Change ☒ Addition

NAME O'BRIEN, POLLIE
STREET ADDRESS 13225 SE 101 ST #486
CITY-ST-ZIP LARGO FL

12 NAME VP LALUMIERE, ANITA ☐ Change ☒ Addition

STREET ADDRESS 13225 101ST ST SE #320
CITY-ST-ZIP LARGO FL

13 NAME D HANSON, PETE ☐ Change ☒ Addition

STREET ADDRESS 13225 101ST SE #223
CITY-ST-ZIP LARGO FL

14 NAME D DARLING, ILA ☐ Change ☒ Addition

STREET ADDRESS 13225 SE 101 ST #435
CITY-ST-ZIP LARGO FL

15 NAME D REDA, IRENE ☐ Change ☒ Addition

STREET ADDRESS 13225 SE 101 ST #393
CITY-ST-ZIP LARGO FL

16 NAME T VRANA, RICHARD F. ☐ Change ☒ Addition

STREET ADDRESS 13225 SE 101 ST #415
CITY-ST-ZIP LARGO FL

17. 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:

E. C. Hanson

3/7/96 813-586-4702

Daytime Phone

CR2E037 (12/95)