FILE NOW: FILING FEE AFTER MAY 1ST IS $155.00

APPROVED AND FILED

CORPORATION ANNUAL REPORT **1995**

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

1995 MAR 14 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 753558 (6)

1. Corporation Name

LIVE OAK GOLF & COUNTRY CLUB, INC.

200001430872
-03/16/95--01003--013
****130.00 ****130.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
STAR RT 2 BOX 452 CRESCENT CITY FL 32112	STAR RT 2 BOX 452 CRESCENT CITY FL 32112

3. Date Incorporated or Qualified: 07/30/1980
3a. Date of Last Report: 03/02/1994
4. FEI Number: 59-1975485 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PADGETT, JAMES L.
315 EAST CENTRAL AVENUE
CRESCENT CITY FL

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
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	P	1.1 TITLE	☐ Change ☐ Addition
NAME	KEATHLEY, WILLIAM	1.2 NAME	
STREET ADDRESS	505 N LAKE ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	CRESCENT CITY FL	1.4 CITY-ST-ZIP	
TITLE	~~V~~	2.1 TITLE	V ☒ Change ☐ Addition
NAME	~~CLARKE, CLARE~~	2.2 NAME	JEROME PETERSON
STREET ADDRESS	~~P O BOX 610 N/A~~	2.3 STREET ADDRESS	P O BOX 75
CITY-ST-ZIP	~~CRESCENT CITY FL~~	2.4 CITY-ST-ZIP	GEORGETOWN, FL 32139 N/A
TITLE	T	3.1 TITLE	S/T ☒ Change ☐ Addition
NAME	GAREAU, LEA	3.2 NAME	GAREAU, LEE
STREET ADDRESS	P.O. BOX 643 N/A	3.3 STREET ADDRESS	P O BOX 643
CITY-ST-ZIP	GEORGETOWN FL	3.4 CITY-ST-ZIP	Georgetown, Fl 32139 N/A
TITLE	S	4.1 TITLE	D ☒ Change ☐ Addition
NAME	NARMORE, JEANNE	4.2 NAME	NARMORE, JEANNE
STREET ADDRESS	P.O. BOX 66 N/A	4.3 STREET ADDRESS	P O BOX 66 N/A
CITY-ST-ZIP	WEKALA FL	4.4 CITY-ST-ZIP	Welaka, FL 32193
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	SCHAMLE, ROBERTA	5.2 NAME	
STREET ADDRESS	STAR RT 2 BOX 389 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	CRESCENT CITY FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	DEA ☐ Change ☐ Addition
NAME	LABERTEAUX, ROBERT	6.2 NAME	
STREET ADDRESS	STAR RT 2 BOX 442 F N/A	6.3 STREET ADDRESS	3-14
CITY-ST-ZIP	CRESCENT CTY FL	6.4 CITY-ST-ZIP	

14. 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)(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.

SIGNATURE: W. C. Keathley W. C. KEATHLEY 2/20/95 (904) 698-4297
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Date Daytime Phone #

0023104