FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 758735 1. Corporation Name

CYPRESS RUN GOLF CLUB, INC.

Principal Place of Business

Mailing Address

FILED Apr 07, 1999 8:00 am § Secretary of State

04-07-1999 90124 044 ****61.25

| 2669 ST. ANDREWS BLVD. TARPON SPRINGS FL 34689-6310 Z669 ST. ANDREWS BLVD. TARPON SPRINGS FL 34689-6310 TARPON SPRINGS FL 34689-6310 | | | 6310 | | | | |
|--|--|------------------------------------|---------------|---------------------------------|--|-----------------|-------------------|
| 2. Principal Pl | incipal Place of Business 2a. Mailing Address | | | | 3. Date incorporated or Qualifed | | |
| 21 | 26 | | | | 06/12/1981 | | |
| Suite, Apt. #, etc. Suite, Apt. #, et | | | etc. | | 4. FEI Number | <u> </u> | plied For |
| 22 27 | | | , , ~ . | | 59-2121717- | | t Applicable - |
| City & State | City & State | y & State | | 5. Certifcate of Status Desired | \$8.75 A Fee Re | | |
| Zip | Country Zip Cou | | | | 6. Election Campaign Financing | \$5,00 | May Be |
| 24 | 25 29 30 | | | | Trust Fund Contribution | Added to | |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered | Agent | |
| _ | | <u></u> | 81 | Name | | | |
| peror Moulet I/ | | | | Street A | Address (P.O. Box Number is Not Acceptable) | | |
| REESE, MICHAEL K. | | | | Sueet | Address (1.0. box Hulfibor is Not Nocopiosis) | | |
| 696 1ST AVE. N. C. A. C. | | | 83 | | ,· | | |
| ST PETERSBURG FL 33701 | | | _ | | | 85 Zip C | `odo |
| | | | 84 | City | Fl | 85 Zip C | ,oue |
| 11. Pursuant | to the provisions of Sections 617.0502 | and 617.1508, Florida Statutes, | the abov | e-named | corporation submits this statement for the purpose o | f changing its | registered |
| 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: Re | gistered Age | nt signature re | equired when reinstating) DATE | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFICERS A | | RS IN 12 |
| TITLE | VPD | X DELETE | 1,1 TITLE | | P/D | X Change | Addition |
| NAME | = | | 1.2 NAME | | Still, William R. | | |
| STREET ADDRESS | 896 ROYAL BIRKDALE DR | | 1.3 STREE | T ADDRESS | 896 Royal Birkdale Dr. | | |
| CITY-ST-ZIP | TARPON SPRINGS FL 34689 | • | 1.4 CITY-S | 1 | Tarpon Springs, E I 34689 | | |
| TITLE | D | ☆ DELETE | 2.1 TITLE | | VP/D Brewer, Arnold A. | Change | ☐ Addition |
| NAME | BREWER, ARNOLD A. | | 2.2 NAMÉ | | · | | |
| STREET ADDRESS | 1040 ROYAL BIRKDALE DR | | 23 STREE | TADDRESS | 1040 Royal Birkdale Dr. | | |
| 1 | | | 2. 4 CITY-5 | | Tarpon Springs, F I 34689 | ہ کہ میںسے پہلے | |
| CITY-ST-ZIP | <u>-TARPON SPRINGS FL 34689</u> | X DELETE | 3.1 TITLE | J1 - 441 - C | T/D | Change | Addition |
| NAME | TD FARILE | _ | 3,2 NAME | | Sullivan, Brian T. | | |
| | MOLLOY, EARL F. | | | T ADDRESS | 4755 Berwyn Ct. | | |
| STREET ADDRESS | 2600 ST. ANDREWS BLVD. | | 3.4. CITY-5 | | Palm Harbor, FL 34685 | | |
| CITY-ST-ZIP | TARPON SPRINGS FL | DELETE | 4.1 TITLE | 51-ZIP | D | ☐ Change | ★ Addition |
| NAME | SD COUNTRY HEDDEDT | | 4.2 NAME | ļ | Eames, W. Ross | | Ì |
| STREET ADDRESS | SCHWARTZ, HERBERT | | | T ADDRESS | 1008 Royal Birkdale Dr. | | |
| 1 | 2922 ST. ANDREWS BLVD. | | 4.4 CITY-S | | Tarpon Springs, FL 34689 | | |
| TITLE | TARPON SPRINGS FL | □ DELETE | 5.1 TITLE | 11- ZSF | D | Change | [≱ Addition |
| 1 | D CORROLA CARL I | | 5.2 NAME | | Heveran, Edward | | |
| NAME | COPPOLA, CARL L. | | | TADDRESS | 611 Royal Dornoch Ct. | | |
| STREET ADDRESS | 1025 ARLINBROOK DR | | 5.4 CITY-S | | Tarpon Springs, FL 34689 | | |
| CITY-ST-ZIP | NEW PORT RICHEY FL 34655 | DELETE | 6.1 TITLE | | Domaining, Tan O. | Change | ☐ Addition |
| í | D CHAODE DAVED O | | 6.2 NAME | | 1 | | |
| NAME | GILMORE, DAVID C. | | | TADDRESS | Bônárīgo, BēneC. C. | | |
| STREET ADDRESS | - 10- 1111-1111-1111-1111-1111-1111-111 | | 6.4 CITY-S | i | 1046 Royal Troon Ct. | | |
| CITY-ST-ZIP | NEW PORT RICHEY FL 34652 | | 0.4 (3) 1 - 5 |) 1* ZIF | Tarpon Springs, FL 34689 | | |

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:



A Private Golf Club

304050-90124-44 158735

Cypress Run Golf Club, Inc. 2669 St. Andrews Boulevard Tarpon Springs, FL 34689 Pro Shop (727) 937-3191 Maintenance (727) 938-5832 Club House (727) 938-3774 FAX (727) 942-8814

March 29, 1999

Division of Corporations
Annual Reports Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Document #758735

To Whom It May Concern:

Additional Director for the Board of Governors is:

D Kelly, Thomas M. 2609 Royal Birkdale Dr. Tarpon Springs, FL 34689

D
Lane, William N.
623 Tessier Drive_____
Tarpon Springs, FL 34689

Sincerely,

Ann Lane Administrative Assistant