2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

FILED DOCUMENT # **769470** Jan 12, 2000 8:00 am 1. Entity Name **Secretary of State** DELTONA HILLS GOLF AND COUNTRY CLUB, INC. 01-12-2000 90121 043 ****70.00 Mailing Address Principal Place of Business 1120 ELKCAM BLVD. 1120 ELKCAM BLVD. **DELTONA FL 32725-2809 DELTONA FL. 32725** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2311338 Not Applicable Country \$8.75 Additional Zip Country \boxtimes 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ZIELINSKI, THOMAS J. Street Address (P.O. Box Number is Not Acceptable) MCLAUGHLIN, NEIL 1221 N. OLD MILL DRIVE 538 EVERETT STREET **DELTONA FL 32725** Zip Code DELTONA 32725 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. PRESIDENT 01-04-2000 (NOTE: Registered Agent signature required when reinstating) IELINSKI Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Addition TITLE 🔂 Change TITLE Delete P NAME NAME MCLAUGHLIN, NEIL ZIELINSKI, THOMAS J. STREET ADDRESS STREET ADDRESS 1221 N OLD MILL DR 538 EVERETT STREET CITY-ST-ZIP CITY-ST-ZIP DELTONA FL 32725 DELTONA, FL 32725 Addition □ Change TITLE TITLE SD Delete SD NAME ZIELINSKI, THOMAS J NAME McLOUGHLIN, DON STREET ADDRESS 2429 DELBARTON AVENUE STREET ADDRESS 538 EVERETT ST CITY-ST-ZIP CITY-ST-ZIP **DELTONA FL 32725** DELTONA, FL 32725 ☐ Change Addition TITLE 🗻 🧸 VD-, - ---X Delete TITLE . VD - ---NAME GUGLIELMO, FLAVIUS CORNELL, DALLAS NAME STREET ADDRESS STREET ADDRESS 1092 PROVIDENCE BLVD. 750 OAK TERRACE CITY-ST-ZIP CITY-ST-ZIP DELTONA FL 32725 ORANGE CITY, FL 32763 Addition Change TITL F TITLE TD X Delete NAME MICK, DELMER NAME CONGER, JOSEPH STREET ADDRESS STREET ADDRESS 636 S. WELLINGTION DRIVE 2081 DEBORAH TERRACE CITY-ST-ZIP CITY-ST-ZIP DELTONA, FL 32725 **DELTONA FL 32725** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I 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 report or supplemental 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 10 or Block 11 if

904-789-3911 Davtime Phone #