PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 843035

1. Corporation Name

PALMER COURSE DESIGN COMPANY

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Principal Place	of Business	Mailing Address			1,000		
IMG CENTER		IMG CENTER					
SUITE 100, 1360 E 9TH ST SUITE 100, 1360 E			9TH ST				
CLEVELAND OF	1 44114-782	··	CLEVELAND OH 44114-782		DO NOT WRITE IN THIS SPACE		
US US					3. Date Incorporated or Qualifed		
					04/17/1979		
2. Principal P	ace of Business	2a. Mailing Addre	ss		4. FEI Number	Appi	ied For
21	·	26			34-0896816	Not	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #,	etc.			\$8.75 Ac	Iditional
22	,	27			5. Certifcate of Status Desired	Fee Req	uired
City & State	· · · · · · · · · · · · · · · · · · ·	City & State			-6 Election Campaign Financing	\$5.00 N	lav Be
	*	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Col	untry	8. This corporation owes the current		
⊢ , ·		⊢ '		arra y	Personal Property Tax.		□No
24	25	29	30		10. Name and Address of New Reg		
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Reg	Jistereu Agent	
AT (CODDODATION CYCTEM			81 Name			
	CORPORATION SYSTEM			82 Street Addr	ess (P.O. Box Number is Not Acceptable	9)	
1200 S. PINE ISLAND ROAD							
PLANTATION FL 33324				83			1
						la-1 7: 0	4.
1				84 City		FL 85 Zip Co	ode
			a Ctatutaa tha a	have named som	oration submits this statement for the pu	- - , ,	egistered
11. Pursuant	to the provisions of Sections 607.0502 edistered agent, or both, in the State o	and 607.1506, Florida of Florida. Such chand	a Statutes, tile a e was authorize	d by the corporation	on's board of directors. I hereby accept t	he appointment as regi	stered
agent. I a	m familiar with, and accept the obligat	ons of, Section 607.0	505, Florida Stat	tutes			
SIGNATURE							
O.C. T. T. C. T.	Signature, typed or printed name of registered agent		(NOTE: Registered	d Agent signature require		DATE	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	V	☐ DE	LETE 1.1 T	ITLE		Change	Addition
NAME	SEAY, EDWIN B						
STREET ADDRESS			1.2 N	IAME			
CITY-ST-ZIP	I IMG CENTER, SUITE 100, 1360	E 9TH ST		TREET ADDRESS			
	IMG CENTER, SUITE 100, 1360		1.3 S	TREET ADDRESS			
	CLEVELAND, OHIO 00000 4411	l4-1782 <u> </u>	1.3 S	TREET ADDRESS		☐ Change	Addition
TITLE	CLEVELAND, OHIO 00000 4411		1.3 S 1.4 C LETE 2.1 T	TREET ADDRESS		☐ Change	Addition
TITLE NAME	CLEVELAND, OHIO 00000 4411 T ZUGAY, JACK	4-1782 ☐ DE	1.3 S 1.4 C LETE 2.1 T 22 N	TREET ADDRESS ITY-ST-ZIP ITLE IAME		☐ Change	Addition
TITLE	CLEVELAND, OHIO 00000 4411 T ZUGAY, JACK IMG CENTER, SUITE 100, 1360	14-1782 □ DE □ E 9TH ST	1.3 S 1.4 C LETE 2.1 T 22 N	TREET ADDRESS		☐ Change	Addition
TITLE NAME	CLEVELAND, OHIO 00000 4411 T ZUGAY, JACK IMG CENTER, SUITE 100, 1360 CLEVELAND, OHIO 00000 4411	4-1782 DE E 9TH ST 4-1782	1.3 S 14 C LETE 2.1 T 22 N 2.3 S 2.4 C	TREET ADDRESS LITY-ST-ZIP TILE LAME TREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS	CLEVELAND, OHIO 00000 4411 T ZUGAY, JACK IMG CENTER, SUITE 100, 1360	14-1782 □ DE □ E 9TH ST	1.3 S 1.4 C LETE 2.1 T 22 N 2.3 S 2.4 C	TREET ADDRESS LITY-ST-ZIP TILE LAME TREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CLEVELAND, OHIO 00000 4411 T ZUGAY, JACK IMG CENTER, SUITE 100, 1360 CLEVELAND, OHIO 00000 4411	4-1782 DE E 9TH ST 4-1782	1.3 S 14 C LETE 2.1 T 22 N 2.3 S 2.4 C	TREET ADDRESS ATY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CLEVELAND, OHIO 00000 4411 T ZUGAY, JACK IMG CENTER, SUITE 100, 1360 CLEVELAND, OHIO 00000 4411 P PALMER, ARNOLD D	4-1782 DE	13S 14G 21T 22N 23S 2.4G LETE 3.1T 32N	TREET ADDRESS ATY-ST-ZIP TILE AME TREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CLEVELAND, OHIO 00000 4411 T ZUGAY, JACK IMG CENTER, SUITE 100, 1360 CLEVELAND, OHIO 00000 4411 P PALMER, ARNOLD D IMG CENTER, SUITE 100, 1360	4-1782 DE E 9TH ST 4-1782 DE E 9TH ST	13S 14C LETE 2.1T 22N 23S 2.4C LETE 3.1T 32N 33S	TREET ADDRESS JITY-ST-ZIP ITLE JAME JTREET ADDRESS CITY-ST-ZIP ITLE JAME JAM			
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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 suppliemental 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachagent with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90074 047 ***150.00