

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000006285 (8)

1. Corporation Name
TEAM CLASSIC GOLF SERVICES, INC.



Principal Place of Business

215 NORTH EOLA DRIVE
ORLANDO FL 32801
US

Mailing Address

215 NORTH EOLA DRIVE
ORLANDO FL 32801
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/03/1996

4. FEI Number

59-3208255

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 ONE PHIL RITSON WAY

Suite, Apt. #, etc.

22 City & State

23 WINTER GARDEN FL

Zip Country

24 34787 25

2a. Mailing Address

26 P.O. Box 690577

Suite, Apt. #, etc.

27 City & State

28 ORLANDO FL

Zip Country

29 32869 30

9. Name and Address of Current Registered Agent

YERGLER, JON C
215 NORTH EOLA DRIVE
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

PHILIP V RITSON

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

ONE PHIL RITSON WAY

83

84 City

WINTER GARDEN FL

85 Zip Code

34787

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

Signature of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

4-30-98

DATE

12. OFFICERS AND DIRECTORS

TITLE DCP ☐ DELETE

NAME RITSON, PHILIP V
STREET ADDRESS P.O. BOX 690577 N/A
CITY-ST-ZIP ORLANDO FL

TITLE DV ☐ DELETE

NAME HARWELL, CHARLES H
STREET ADDRESS P.O. BOX 690577 N/A
CITY-ST-ZIP ORLANDO FL

TITLE D ☐ DELETE

NAME PASSILLA, JAMES P
STREET ADDRESS P.O. BOX 690577 N/A
CITY-ST-ZIP ORLANDO FL

TITLE DS ☐ DELETE

NAME RITSON, MICHELLE
STREET ADDRESS P.O. BOX 690577 N/A
CITY-ST-ZIP GOTH A FL

TITLE D ☒ DELETE

NAME YATES, P. DANIEL
STREET ADDRESS P.O. BOX 690577 N/A
CITY-ST-ZIP ORLANDO FL

TITLE D ☐ DELETE

NAME ISAYAMA, CHIYOKO
STREET ADDRESS P.O. BOX 690577 N/A
CITY-ST-ZIP ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS ONE PHIL RITSON WAY
1.4 CITY-ST-ZIP WINTER GARDEN FL 34787

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS ONE PHIL RITSON WAY
2.4 CITY-ST-ZIP WINTER GARDEN FL 34787

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS ONE PHIL RITSON WAY
3.4 CITY-ST-ZIP WINTER GARDEN FL 34787

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS ONE PHIL RITSON WAY
4.4 CITY-ST-ZIP WINTER GARDEN FL 34787

5.1 TITLE ☒ Change ☒ Addition

5.2 NAME JAMES JENKINS
5.3 STREET ADDRESS ONE PHIL RITSON WAY
5.4 CITY-ST-ZIP WINTER GARDEN FL 34787

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS ONE PHIL RITSON WAY
6.4 CITY-ST-ZIP WINTER GARDEN FL 34787

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 record owner 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 attachment with an address.

SIGNATURE

PHILIP V RITSON

4-30-98

CR2E034 (10/97)