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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000004524 (1)

GOLF HOST MANAGEMENT, INC.

Principal Place of Business Mailing Address THREE PICKWICK PLAZA. STE 250 THREE PICKWICK PLAZA. STE 250 **GREENWICH CT 06830 GREENWICH CT 06830** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>08/27/19</u>97 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 26 Suite, Apt. #. etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 27 City & State City & State 6. Election Campaign Financing Trust Fund Contribution 23 28

Ζip

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C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324**

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Country

9. Name and Address of Current Registered Agent

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8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

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

10. Name and Address of New Registered Agent

FILED

May 01 1998 8:00am

Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

			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 Standards typed or proted name of registered agent and label applicable (NOT) Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	☐ DELETE	1.1 TITLE	President and Treasurer. Change Addition	
NAME	KLEEMAN, MERRICK		1.2 NAME		
STREET ADDRESS	3 PICKWICK PLAZA, STE 250		1.3 STREET ADDRESS	Merrick R. Kleeman Group, L.L.C.	
CITY-ST-ZIP	GREENWICH CT		1.4 CITY - ST - ZIP	Three Pickwick Phaa, suite 250, Greenwich, CT	
TITLE	CD	DELETE	2.1 TITLE	My a Depoi Aport and Sociation / Li Change Ext Addition	
NAME	STERNLICHT, BA RRY		2.2 NAME	Richard Akin co Gelf Host Resorts, Inc.	
STREET ADDRESS	3-PICKWICK PLAZA, STE 250		2.3 STREET ADDRESS	of Gelf Host Resorts, Inc.	
CITY-ST-ZIP	GREENWICH-CT-		2. 4 CITY - ST - ZIP	36750 U.S. HWY 19 North, Allow Harbor, FL, 34684	
TITLE	\$ 0	DELETE	3.1 TITLE	Change Addition	
NAME	grose, madison-		3.2 NAMÉ		
STREET ADDRESS	3-PICKWICK PLAZA, STE 250		3.3 STREET ADDRESS		
CITY-ST-ZIP	GREENWICH CT		3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE	Change Addition	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition	
NAME			5.2 NAME	·	
STREET AODRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY-ST-ZIP		

Country

81 Name

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14. Thereby 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 tystec empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or on an attach part with part address.