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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G04989

(1)

KILLEARN CLUB MANAGEMENT INC.

FILED Apr 17 1997 8:00am Secretary of State



2. Principal Prace of Business 2. Mailing Address 2. Mailing Address 3. FEI Number 59-2231247 Suite, Apt. #, etc. 5. Certificate of Status Desired 22	Yes No stered Agent e)
3. Date Incorporated or Qualified 10/19/1982 2. Principal Frace of Business 2a. Mailing Address 4. FEI Number 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 27 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-2231247 Strile, Apt. #, etc. 5. Certificate of Status Desired 59-223124 Strile, Apt. #, etc	C3/07/1996 Applied For Not Applied For Not Applied For St. 75 Additional Fee Required \$5.00 May Be Added to Fees Name of St. 199.032 No Istered Agent By Code FL 85 Zip Code FL 85 Zip Code Troose of changing its register the appointment as registered the appointment as registered RS AND DIRECTORS IN 12
2. Principal Prace of Business 2. Mailing Address 59-2231247 Suite, Apt. #, etc. 5. Certificate of Status Desired 6. Election Campaign Financing 7 Trust Fund Contribution 8. This corporation has liability for int Florida Statutes 9. Name and Address of Current Registered Agent 7 THOMSON, W. FREDERICK 3375-G CAPITAL CIRCLE, N.E. 7 TALLAHASSEE, FL 32308 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pur office or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes 8 SIGNATURE 8 Signature, specific period revise of registered Agent applicable (NOTE Registered Agent signature required when reinstalling) 12. OFFICER SAND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE 14 TITLE 15 NAME 15 NAME 16 THOMSON, W. FREDERICK 17 NAME 18 SIRRET ADDRESS	Applied For Not Applied For Not Applica \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Intengible tax under s. 199.032 Yes No Illestered Agent BS Zip Code Unpose of changing its register the appointment as registered The Application of the Applicatio
Suite, Apt. #, etc. Suite, Apt. #, etc.	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees Itangible tax under s. 199.032 Yes X No Ilstered Agent B5 Zip Code Urpose of changing its register the appointment as registered.
City & State Country Ztp Country At 25 9. Name and Address of Current Registered Agent THOMSON, W. FREDERICK 3375-G CAPITAL CIRCLE, N.E. TALLAHASSEE, FL 32308 83 B4 City 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the pur 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 agent Fam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE THOMSON, W. FREDERICK SIGNATURE THOMSON, W. FREDERICK 3375-G CAP. CIR. NE 1.3 STREET ADDRESS THOMSON, W. FREDERICK 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	Fee Required \$5.00 May Be Added to Fees Itangible tax under s. 199.032 Yes M No Ilstered Agent B5 Zip Code Urpose of changing its register the appointment as registered. DATE ERS AND DIRECTORS IN 12
City & State City & State City & State City & State City & State City & State City & State Trust Fund Contribution Zip	Added to Fees intengible tax under s. 199.032 Yes No Ilstered Agent B5 Zip Code Urpose of changing its register the appointment as registere DATE ERS AND DIRECTORS IN 12
Zip Country Zip Country 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Register Agent 10. Name and 10. Name and Address of New Register Agent 10. Name and Address of New Register Agent 10. Name and 10. Na	Intengible tax under s. 199.032 Yes No Yes No Ilstered Agent B5 Zip Code Urpose of changing its register the appointment as registered DATE ERS AND DIRECTORS IN 12
9. Name and Address of Current Registered Agent THOMSON, W. FREDERICK 3375-G CAPITAL CIRCLE, N.E. TALLAHASSEE, FL 32308 81 Name 82 Street Address (P.O. Box Number is Not Acceptable 83 Street Address (P.O. Box Number is Not Acceptable 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the pur 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 agent Familian with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, based or printed torus of registered agent and the displicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS SIGNATORS 3375-G CAP. CIR. NE	Yes No stered Agent e)
9. Name and Address of Current Registered Agent THOMSON, W. FREDERICK 3375-G CAPITAL CIRCLE, N.E. TALLAHASSEE, FL 32308 81 Name 82 Street Address (P.O. Box Number is Not Acceptable 83 Street Address (P.O. Box Number is Not Acceptable 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pur 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 to agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, yield or penilod name of registered agent and tile if applicable (NOTE Registered Agent signature required when reinstalling) 12. OF FICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICE 11 TITLE 12 NAME 1.3 STREET ADDRESS SIGNATURE THOMSON, W. FREDERICK 1.3 STREET ADDRESS	e) B5 Zip Code Urpose of changing its register the appointment as registered DATE ERS AND DIRECTORS IN 12
THOMSON, W. FREDERICK 3375-G CAPITAL CIRCLE, N.E. TALLAHASSEE, FL 32308 81 Street Address (P.O. Box Number is Not Acceptable 82 Street Address (P.O. Box Number is Not Acceptable 83 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pur 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 to agent Familian with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, based or printed name of registered agent and tited applicable (NOTE Registered Agent signature required when reinstalling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE THOMSON, W. FREDERICK 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	FL 85 Zip Code Urpose of changing its registered the appointment as registered DATE ERS AND DIRECTORS IN 12
3375-G CAPITAL CIRCLE, N.E. TALLAHASSEE, FL 32308 82 Street Address (P.O. Box Number is Not Acceptable 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pur 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 agent Familian with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, head or printed name of registered agent and till of applicable (NOTE Registered Agent signature required when reinstalling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE 1.1 TIFLE THOMSON, W. FREDERICK 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	FL 85 Zip Code urpose of changing its registered the appointment as registered that ERS AND DIRECTORS IN 12
TALLAHASSEE, FL 32308 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pur 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 agent Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, based or printed panil of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE THOMSON, W. FREDERICK 1.1 TITLE THOMSON, W. FREDERICK 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	FL 85 Zip Code urpose of changing its registered the appointment as registered that ERS AND DIRECTORS IN 12
32308 83 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the puroffice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept agent Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, based or printed panel of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE THOMSON, W. FREDERICK 1.1 TITLE THOMSON, W. FREDERICK 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	DATE DATE DATE The appointment as registered as registe
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the pur 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 agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE THOMSON, W. FREDERICK 1.2 NAME 1.3 STREET ADDRESS 3775-G CAP. CIR. NE 1.3 STREET ADDRESS	DATE DATE DATE The appointment as registered as registe
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the pur 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 agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE THOMSON, W. FREDERICK 1.2 NAME 1.3 STREET ADDRESS 3775-G CAP. CIR. NE 1.3 STREET ADDRESS	DATE DATE DATE The appointment as registered as registe
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 to agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, based or printed panie of registered agent and titled applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE 1.1 TITLE THOMSON, W. FREDERICK 1.2 NAME 1.3 STREET ADDRESS 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	the appointment as registered DATE ERS AND DIRECTORS IN 12
THE PSD L DELETE 1.1 TITLE THOMSON, W. FREDERICK 1.2 NAME THEST ADDRESS 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	Channe Addi
AME THOMSON, W. FREDERICK 1.2 NAME THEEL ADDRESS 3375-G CAP. CIR. NE 1.3 STREET ADDRESS	
TALLAHASSEE, FL 00000 1.4 DITY-ST-ZIP	
DELETE 21 TITLE	Change Addi
ASS/C	
TREET ADDRESS 2.3 STREET ADDRESS	
11Y - ST 7IP 2 4 CITY - ST - ZIP 11H	Change Addi
AAM 32 NAME	C Change C 7.00
IREE LADDRESS 3.3 STREET ADDRESS	
17Y 51-7P	
DELETE 41 TITLE	Change Addi
AV: 4.2 NAME	
TREET ADDRESS 4.3 STREET ADDRESS	
A 4 CITY-ST-ZIP	
TLE DELETE 5.1 TITLE	Change Addi
AME 5.2 NAME 15.61 ADDRESS 5.3 STREET ADDRESS	
1.F	Change Add
62 NAME	
TREE LADINESS 6.3 STREET ADDRESS	
11Y - ST- ZIP	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or on an attachment with an address.

SIGNATURE: U

904-385-7444

0048188