

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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90034 004 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G11669

1. Corporation Name

MISTY CREEK COUNTRY CLUB, INC.

Principal Place of Business

8954 MISTY CREEK DR
SARASOTA FL 34241

Mailing Address

8954 MISTY CREEK DR
SARASOTA FL 34241

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/03/1982

4. FEI Number

59-2245182

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

SEUFFERT, JANIE
8954 MISTY CREEK DR
SARASOTA FL 34241

10. Name and Address of New Registered Agent

81 Name

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

83

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE S
NAME BURNS, RAYMOND
STREET ADDRESS 3560 COUNTRY PLACE
CITY-ST-ZIP SARASOTA FL 34233

TITLE VP
NAME FIORELLI, EDWARD
STREET ADDRESS 4884 WOOD POINTE WAY
CITY-ST-ZIP SARASOTA FL 34241

TITLE P
NAME THOMAS, LAURENCE
STREET ADDRESS 8822 MISTY CREEK DRIVE
CITY-ST-ZIP SARASOTA FL 34241

TITLE T
NAME MCCracken, OLIVER
STREET ADDRESS 8845 MISTY CREEK DR.
CITY-ST-ZIP SARASOTA FL 34241

TITLE D
NAME PALUMBO, JERRY
STREET ADDRESS 925 BAY SHORE ROAD
CITY-ST-ZIP NOKOMIS FL 34275

TITLE D
NAME SINGER, JAMES
STREET ADDRESS 8363 EAGLE CROSSING
CITY-ST-ZIP SARASOTA FL 34241

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change

☐ Addition

1.1 TITLE VICE PRESIDENT
1.2 NAME BURNS, RAYMOND
1.3 STREET ADDRESS 3560 COUNTRY PLACE
1.4 CITY-ST-ZIP SARASOTA, FL 34233

2.1 TITLE TREASURER
2.2 NAME PALUMBO, JERRY
2.3 STREET ADDRESS 8871 MISTY CREEK DRIVE
2.4 CITY-ST-ZIP SARASOTA, FL 34241

3.1 TITLE SECRETARY
3.2 NAME SINGER, JAMES
3.3 STREET ADDRESS 8363 EAGLE CROSSING
3.4 CITY-ST-ZIP SARASOTA, FL 34241

4.1 TITLE DIRECTOR
4.2 NAME CURTIS, CHARLES
4.3 STREET ADDRESS 8355 EAGLE CROSSING
4.4 CITY-ST-ZIP SARASOTA, FL 34241

5.1 TITLE DIRECTOR
5.2 NAME DELAHANTY, EDWARD
5.3 STREET ADDRESS 695 TROPICAL CIRCLE
5.4 CITY-ST-ZIP SARASOTA, FL 34242

6.1 TITLE DIRECTOR
6.2 NAME GEROW, LEONARD
6.3 STREET ADDRESS 8445 EAGLE PRESERVE WAY
6.4 CITY-ST-ZIP SARASOTA, FL 34241

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 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

LAURENCE
THOMAS

(941) 922-2188

CR2E034 (1/98)