

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

FILED

**Feb 04 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G47804 (1)

1. Corporation Name
DELAND COUNTRY CLUB, INC.



Principal Place of Business 2289 COUNTRY CLUB DR DELAND FL 32724 US	Mailing Address 2289 COUNTRY CLUB DRIVE DELAND FL 32724 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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3. Date Incorporated or Qualified 07/07/1983	4. FEI Number 59-2872802	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

**BARRETT, ANDREW
401 SECLUDED OAKS TRAIL
DELAND FL 32724**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	BARRETT, ANDREW	
STREET ADDRESS	401 SECLUDED OAKS TRAIL	
CITY-ST-ZIP	DELAND FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CLIFTON, GEORGE	
STREET ADDRESS	4185 SR 11	
CITY-ST-ZIP	DELAND FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	COMPE, VICTOR P	
STREET ADDRESS	2255 RIVER RIDGE RD	
CITY-ST-ZIP	DELAND FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	COOPER, JEREMY	
STREET ADDRESS	38 GARDEN DR	
CITY-ST-ZIP	DELAND FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ALEXANDER, WILLIAM	
STREET ADDRESS	2547 VALLEY VIEW CT	
CITY-ST-ZIP	DELAND FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	KUMAS, CHARLES	
STREET ADDRESS	32 MORNING GLORY DR	
CITY-ST-ZIP	DEBARY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	D
3.3 STREET ADDRESS	ACREE, WALTER M
3.4 CITY-ST-ZIP	Rxxxxxx166 925 Island Grove Dr. DELAND, FL. 32724 32724
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	S
6.3 STREET ADDRESS	MENKART, GEORGE
6.4 CITY-ST-ZIP	1525 COVERED BRIDGE DRIVE DELAND, FL. 32724

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.

Andrew Barrett Andrew Barrett 01-15-98 904-734-9675

CR2E034 (10/97)