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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Jan 20 1998 8:00am Secretary of State

Principal Place of Business # THOMAS W. DURKIN COUNTRY CLIB VILLAGE, V-8 LAKE WALES FL 33853 2. Principal Place of Business 21 536 Chohose Den 22 2a. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State Country Zip Zip Zip Zip Zip Zip Zip Zi
THOMAS W. DURKIN COUNTRY CLUB VILLAGE. V-8 LAKE WALES FL 33853 2. Principal Place of Business 21 536 CLUB HOMAS W. DURKIN Suite, Apt. #, etc. 22 City & State 23 Lake Wales FL 33853 City & State 24 33853 Country 25 Country 26 Country 27 Country 28 Lake Wales FL 33853 Country 29 33853 Mailing Address COUNTRY CLUB VILLAGE. V-8 LAKE WALES FL 33853 DO NOT WRITE IN THIS SPACE 1/18/1985 4. FEI Number 59-2611047 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required 6. Election Campaign Financing Fee Required Fee Required Fee Required Fee Required Country Fee Required
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21 536 CLUBHOUSE DRIVE 26 536 CLUBHOUSE DRIVE 59-2611047 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State City & State Added to Fees Zip Country Zip Country Zip Country Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent DURKIN, THOMAS W. 81 Name
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Trust Fund Contribution Added to Fees Added to Fees Added to Fees This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Personal Property Tax due June 30. Name and Address of New Registered Agent DURKIN, THOMAS W. B1 Name
5. Certificate of Status Desired Fee Required City & State Country Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent DURKIN, THOMAS W. 81 Name
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24 33853 25 PO\\ 29 33853 30 Po\\ Personal Property Tax due June 30. Yes No 9, Name and Address of Current Registered Agent DURKIN, THOMAS W. 81 Name
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DURKIN, THOMAS W. 81 Name
DURKIN, THOMAS W. 81 Name
DURAIN, IHOMAS W.
V-8 COUNTRY CLUB VILLAGE 82 Street Address (P.O. Box Number is Not Acceptable)
LAKE WALES FL 33853
B3
84 City 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 are amplifier with, and society the obligations of, Section 607.0505, Florida Statutes.
agent. I also lambling with, and populations 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 reinstalling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DP DELETE 1.1 TITLE Change Addition
NAME DURKIN, THOMAS W. 1.2 NAME
STREET ADDRESS COUNTRY CLUB VILLAGE #V8 1.3 STREET ADDRESS
CITY-ST-ZIP LAKE WALES FL 1.4 CITY-ST-ZIP
TITLE DELETE 2.1 TITLE Change Addition
NAME 2.2 NAME
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TITLE DELETE 5.1 TITLE Change Addition
NAME 5.2 NAME
STREET ADDRESS
CITY-ST-ZIP
NAME 6.2 NAME
STREET ADDRESS 6.3 STREET ADDRESS

I hereby certify that the indicated on this annual officer or director of the Block 12 or Block 13 if polied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information elemental 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: