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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

(5)

FILED Apr 14 1998 8:00am Secretary of State

| PARADISE GOLF, INC. | | | | | | | | | | | | |
|--|---|------------------|---------------------|---------------------|----------|---------------------------------------|------------|--|--|----------------|-----------------------|---------------------|
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| L | | | | V-1-4- | | | | | | | | |
| Principal Place of Business Mailing Address | | | | | | | | | | | | |
| | 11714 EMERALD COAST PKWY. W DESTIN FL 32541 DESTIN FL 32541 | | | | | | | | : | | | |
| DESTINATE SESSIT | | | | | | | | | DO NOT WRITE I | N THIS S | PACE | |
| Ì | | | | | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | | | | | 06/06/1986 | | | |
| | Principal Pl | lace of Business | | 2a. Mailing Address | | | | 4. FEI Number | | | pplied For | |
| 21 | O-15- A-1 | B -4- | | Suite Apt # ato | | | | 59-2682665 | | | ot Applicable | |
| 22 | Suite, Apt. | #, etc. | Suite, Apt. #, etc. | 27 | | | | 6. Certificate of Status Desired | 凶 | | Additional equired | |
| 1 | City & State | | | City & State | | | | 6. Election Campaign Financing | | | May Be | |
| 23 | | | | 28 | | | | Trust Fund Contribution | | | to Fees | |
| • | Zip | | ountry | Zip Country | | | | | 8. This corporation owes or has paid | the curre | ent year In | tangible |
| 24 | | 25 | 29 | 30 | | | | Personal Property Tax due June 30. Yes No | | | | |
| ⊢ | 9. Name and Address of Current Registered Agent | | | | | | | | 10. Name and Address of New Reg | Istered A | gent | |
| WALLACE, W. WADE | | | | | | | Name | 9 | | | | |
| 5160 HIGHWAY 98 EAST SUITE 27 | | | | | | 62 Street Addr | | | ss (P.O. Box Number is Not Acceptable | 0) | | |
| DESTIN FL 32541 | | | | | | 83 | ···· | | | | | |
| [| OL. | 31114 1 E 32041 | | | | | | | | | | |
| l | | | | | | 84 | City | | | FL | 85 Zip | Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab | | | | | | | -name | d corpo | ration submits this statement for the pu | | changing i | its registered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abcoffice or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statut | | | | | | | | rporatio | n's board of directors. I hereby accept | the appo | intment as | s registered |
| l | GNATURE | | | , | | | | | | | | ļ |
| Signature, typed or printed name of registered agent and title if applicable (NOTE Registered | | | | | | | nt signatu | re required | | DATE | | |
| 12 | LE I | PD | OFFICERS AND | DIRECTORS | 13. | | | | ADDITIONS/CHANGES TO OFFICE | | □ Change | RS IN 12 |
| ı | ME I | BARNHART, F | HILLIP F | 1.21 | | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | | | | , | Grange | |
| 1 | REET ADDRESS | 330 A SIBERT | | | | | | 1 | | | | 1; |
| | Y-ST-ZIP | DESTIN FL | | | | (TY-S1 | | | | | | |
| | LE | \$T | | ☐ DELETE | 2.1 TI | | . 4 | +- | | | Change | Addition |
| N | ME | Barnhart, (| | | 2.2 N | AME | | | | | | ł |
| ST | EET ADDRESS 330 A SIBERT AVE | | | 23 | | 2.3 STREET ADDRESS | | l | u e | | | (|
| cr | Y-ST-ZIP | DESTIN FL | | | | 2. 4 CITY-ST-ZIP | | <u> </u> | | | | |
| | LE | | | ☐ DELETE | 3.1 TI | | | | | 1 | ☐ Change | Addition |
| | ME | | | | 3.2 NAME | | | | | | | |
| Į. | REET ADORESS | | | | | | address | | | | | Ţ |
| _ | Y-ST-ZIP LE | | | DELETE | 3.4. C | | T-ZIP | ┼ | | | Change | Addition |
| ı | ME | | | E Deceie | 4.1 H | | | 1 | | | viaine | - AQUILION |
| f | REET ADDRESS | | | | | | ADDRESS | | | | | l |
| CITY-ST-ZIP | | | | 4.4 CITY-ST-ZIP | | | 1 | | | | | |
| TIT | | | · | ☐ DELETE | 5.1 Ti | | | | | | Change | Addition |
| Į NA | ME | | | | 5.2 N | AME | | | | | | |
| STI | REET ADDRESS | | | | 5 3 S1 | FREET. | ADDRESS | | | | | |
| CI | Y-ST-ZIP | | | · | 5.4 CI | TY-SI | r- ZIP | | | | | |
| TIT | LE | | | ☐ DELETE | 61 TI | TLE | | | | I | Change | ☐ Addition |
| NA | | | | | 6.2 N | | | 1 | | | | |
| 1 | REET ADDRESS | | | | | | address | | | | | |
| | Y-ST-ZIP | | | | | TY-SI | | L | ection 119.07(3)(i) Florida Statutes 16 | | | |

Indicated on this annual report or supplied with this hilling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. 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 eath; 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.

4/7/98 (850) 837-9797