

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J26149 (1)

1. Corporation Name

PINEBROOK-IRONWOOD GOLF CLUB, INC.



Principal Place of Business

2201 4TH ST N.
STE.#200
ST. PETERSBURG FL 33704

Mailing Address

2201 4TH ST N.
STE.#200
ST. PETERSBURG FL 33704

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

CHEEZEM, J. MICHAEL
2201 4TH STREET NORTH
STE. 200
ST. PETERSBURG FL 33704

3. Date Incorporated or Qualified

07/29/1986

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2686383

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

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

TITLE PD
NAME CHEEZEM, J. MICHAEL
STREET ADDRESS 2201 4TH ST. N. STE. 200
CITY-ST-ZIP ST PETERSBURG FL

TITLE S
NAME CAMPBELL, G. SPRING
STREET ADDRESS 2201 4TH ST. N. STE. 200
CITY-ST-ZIP ST. PETERSBURG FL

TITLE T
NAME ALLEN, ROBERT L.
STREET ADDRESS 2201 4TH ST. N. STE. 200
CITY-ST-ZIP ST. PETERSBURG FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

COPELAND, G. SPRING

T/VP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/25/96

Daytime Phone #

813 8230022

CR2E034 (12/95)