SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT

CORPORATION

ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

J88171

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FILED
Jul 10 1996 8:00 am
Secretary of State

FLORIDA	COUNTRY CLUBS, INC.							14101141100000000		
rincipal Place of	f Business	Má	ailing Address						AV ALEN ALEN A	iāli binii ninii niaii inn
1500 WINTER SPRINGS BLVD. WINTER SPRINGS FL 32708  1500 WINTER SPRINGS BLVD. WINTER SPRINGS FL 32708										
								Date Incorporated or Qualified 08/17/1987	{	of Last Report  29/1995 Applied For
. Principal Plac	ce of Business	2a.	Mailing Address				4	FEI Number		Not Applicable
		26	O to Ant # oto				-+	59-2834274		\$8.75 Additional
Suite, Apt #.	etc	22	Suite Apt #, etc				5	. Certificate of Status Desired		Fee Required
0. 0.0		27	City & State	·			6	. Election Campaign Financing		<b>\$5.00</b> May Be
City & State		28	5.,					Trust Fund Contribution		Added to Fees
Zıp	Country		Zip	Co	untry		8	. This corporation has liability for		
- 'F	25	29		30	- <del>-</del>			Florida Statutes L	Yes	No.
	9. Name and Address of Curren	nt Regis	stered Agent		-	r	10	). Name and Address of New Re	gistered A	<u>jenit</u>
AMIZ	CO MAICO D				81	Name				
MIKES, JAMES R. 1500 WINTER SPRINGS BLVD						82 Street Add		(P.O. Box Number is Not Acceptab	ole)	
#W					83					
	ITER SPRINGS FL 32708				03					1
4411	TIET OF THITOS I E SE. SS				84	City			FL	85 Zip Code
agent Lam	o the provisions of Sections 607 056 gistored agent, or both, in the State i familiar with, and accept the oblig	gations o	of, Section 607 0505,	Florida Sta	tutes	e-named or the corpor s		भूग (सार्कारमध्ये	[(A*)	
• S	Signaturo, typed or protest range of registered an OFFICERS Al			13				ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTORS IN 12
2.		TALS CALLE								
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6.11. St. 2P
14. To hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 1.19 07(3)(k), Horida Statutes 1.
14. To hereby certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if further certify that I am an officer or director of the corporation of the receiver or tradee enipowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed it of an attachment with a address

SIGNATURE:

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AMES R. MIKES

407-366-1857

0010074