SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1997			Secretary of State DIVISION OF CORPORATIONS			Secretary of State				
	CUMENT proporation Name		` '							
F	LORIDA GOLF	DEVELOPMENT CO	RPORATION				h 18645111 &10 (8)11 &100 h 1101 U1121 U1121 1	ıı Bidir bidi		ili BiBir i BBi
Princ	pal Place of Busines	s	Mailing Address						4 OTOTA BIRTH OTO	ii minii ikki
4000 US HWY 1 NORTH 1155 15TH ST. NW SUITE 123 STE 811										
ST.	AUGUSTINE FL 32095		WASHINGTON DC 20005			DO NOT WRITE				
U\$			US				3. Date Incorporated or Qualified 06/09/1989	l	ate of Last R 5/01/1996	•
2. Pr	incipal Place of Busin	ness	2a. Mailing Address				4. FEI Number			oplied For
21			26				59-2998736			ol Applicable
22 ,	ilte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8,75 A	
Ci	ty & State		City & State				6. Election Campaign Financing		\$5.00	
23			28				Trust Fund Contribution		Added t	•
Zij	P	Country	Zip	Cou	ntry		8. This corporation owes or has pa			angible No
24 25 29 30 30 9, Name and Address of Current Registered Agent							Personal Property Tax due June 10. Name and Address of New Re			7 NO
	C T CORPOR	ATION SYSTEM			61	Name		<u> </u>		
1200 SOUTH PINE ISLAND ROAD					82	Street Add	iress (P.O. Box Number is Not Acceptab	le)		
PLANTATION FL 33324					83					·
					84	City		FL	85 Zip (Code
8	iffice or regi <mark>ste</mark> red ag igent. I am familiar w	gent, or both, in the State o	and 607,1508, Florida Statutes f Florida. Such change was aut ions of, Section 607,0505, Flori	thorized	d by	the corpora	poration submits this statement for the p ation's board of directors. I hereby accep	urpose o it the app	f changing it pointment as	s registered registered
SIGN	ATURE Signature, typed	or printed name of registered agent			Ager	ni signalure requ	ired when reinstaling)	DATE		
12.	р	OFFICERS AND	DELETE DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	S IN 12
NAME		ERLY, JIN-HYUN	- Deterit	☐ DELETE					FT Cliquide	L A(A)(IIIO)
		TH ST, NW STE 811				ADDRESS				
CITY-S	3474 OLUM	IGTON DC		1.4 CII	1Y-S1	- ZIP				
TITLE	P	PB137 101118/1184	☐ DELETE	1					Change	Addition
NAME	AARE ARTIL AT ABLE ATE AAA				2.2 NAME 2.3 STREET ADDRESS					
CITY-S	14/4 61 014	IGTON DC		2.3 ST						
TITLE	17,0111			3.17()		1-211			Change	Acdition
NAME				3.2 NA	ME					
STREET	ADORESS			3.3 ST	REET A	ADDRESS				
CITY-S	T-ZIP		☐ DELETE	3.4. CI		I-ZIP			Change	Addison
TITLE NAME				4.1 T(T 4. 2 N/					Change	Addition
l	ADDRESS					ADDRESS				
CITY-S				4.4 CIT						
TITLE			DELETE	5.1-111	LE				Change	Addition
NAME				5.2 NA						
	ADDRESS					ADDRESS				
CITY-S TITLE	I-ZII ²		☐ DELETE	5.4 C/T 6.1 T/T		-ZIP	***************************************		Change	Addition
NAME				6.2 NA					+.m.gv	
l	ADORESS					ADDRESS				
CITY-S	T . 710			RACII	tv_st	- 7iP				

14. Ido 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 try-tice 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 attachmon with an address.

9/9/67 202 775 8/30

FILED

Sep 19 1997 8:00am