

5-19.98 B - 7631 - C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M92829 (4)

1. Corporation Name
THE GOLF GARDEN OF DESTIN, INC.



Principal Place of Business 12958 US HWY 98 W DESTIN FL 32541 US	Mailing Address 12958 US HWY 98 W DESTIN FL 32541 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/05/1988	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 59-2929292	Applied For Not Applicable
22 City & State	27	29 City & State	30	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23 Zip	25 Country	28 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	25	29	30	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

MEHLING, GEORGE W
39 PARADISE PT RD
SHALIMAR FL 32579

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DS	1.1 TITLE	☐ Change ☐ Addition
NAME	MEHLING, GEORGE W	1.2 NAME	
STREET ADDRESS	39 PARADISE PT RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	SHALIMAR FL	1.4 CITY-ST-ZIP	
TITLE	DVP	2.1 TITLE	☐ Change ☐ Addition
NAME	WHITMIRE, WARREN T.	2.2 NAME	
STREET ADDRESS	3 LONGWOOD DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SHALIMAR FL	2.4 CITY-ST-ZIP	
TITLE	DT	3.1 TITLE	☐ Change ☐ Addition
NAME	KALTZ, MARK	3.2 NAME	
STREET ADDRESS	303 JUNIPER ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL	3.4 CITY-ST-ZIP	
TITLE	DP	4.1 TITLE	☐ Change ☐ Addition
NAME	KELLER, W. ROBERT	4.2 NAME	
STREET ADDRESS	1459 OAKMONT PL	4.3 STREET ADDRESS	
CITY-ST-ZIP	NICEVILLE FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	FOWLER, SAM	5.2 NAME	
STREET ADDRESS	63 COUNTRYCLUB DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	NALTY, FRANK JR.	6.2 NAME	
STREET ADDRESS	BOX 1266 N/A	6.3 STREET ADDRESS	
CITY-ST-ZIP	BREWTON AL	6.4 CITY-ST-ZIP	

14. I 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 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.

SIGNATURE

W. Robert Keller

4/25/98

CR2E034 (10/97)