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NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N22886**

1. Corporation Name

SAWGRASS COUNTRY CLUB, INC.

534672 - 90177 - 40

Principal Place of Business	Mailing Address
10034 GOLF CLUB DR PONTE VEDRA BEACH FL 32082-3562	10034 GOLF CLUB DR PONTE VEDRA BEACH FL 32082-3562

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 10/07/1987
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2853571 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

CRIMMINS, LEON B
10034 GOLF CLUB DRIVE
PONTE VEDRA BEACH FL 32082

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ 4/30/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	D	☒ Change ☐ Addition
NAME	CAIRNS, STANLEY W		1.2 NAME		
STREET ADDRESS	1 SAWGRASS DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		1.4 CITY-ST-ZIP		
TITLE	VP	☒ DELETE	2.1 TITLE	V	☐ Change ☒ Addition
NAME	CARPENTER, DAVID H		2.2 NAME	Jerry D. Butler	
STREET ADDRESS	17 VILLAGE WALK CIRCLE		2.3 STREET ADDRESS	2647 Longboat Court South.	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		2.4 CITY-ST-ZIP	Ponte Vedra Beach, Fl 32082	
TITLE	S	☒ DELETE	3.1 TITLE	D	☒ Change ☐ Addition
NAME	HARKLEROAD, SALINA		3.2 NAME	Wyand, Stephen E,	
STREET ADDRESS	8011 PEBBLE CREEK LANE E		3.3 STREET ADDRESS	9474 Preston Trail W.	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		3.4 CITY-ST-ZIP	Ponte Vedra Beach, Fl 32082	
TITLE	D	☒ DELETE	4.1 TITLE	P	☐ Change ☒ Addition
NAME	DOUTY, ROBERT E		4. 2 NAME	DE LA HUNT, STANLEY G.	
STREET ADDRESS	9699 PRESTON TRAIL WEST		4.3 STREET ADDRESS	951 SPINNAKER'S REACH	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		4.4 CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082	
TITLE	D	☒ DELETE	5.1 TITLE	S	☐ Change ☒ Addition
NAME	WYAND, STEPHEN E		5.2 NAME	Samuel P. Braud	
STREET ADDRESS	9474 PRESTON TRAIL W		5.3 STREET ADDRESS	2200 Old Barn Road	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		5.4 CITY-ST-ZIP	Ponte Vedra Beach Fl 32082	
TITLE	TD	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BURFEIND, THEODORE		6.2 NAME		
STREET ADDRESS	3275 OLD BARN ROAD WEST		6.3 STREET ADDRESS		
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		6.4 CITY-ST-ZIP		

CR2E037 (11/98)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 5/8/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #