



N29190

November 21, 1997

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

200002355482--5  
-11/24/97--01104--006  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Sirs:

Enclosed please find the Statement of Change of Registered Agent and the required filing fee of \$35.00.

If you need any additional information, please call me at 561-220-1010.

Thank you.

Sincerely,

WILLOUGHBY GOLF CLUB, INC.

Patricia C. Hoag

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APPROVED  
AND  
FILED

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N29190  
RFA  
11-24-97  
202

# Florida Department of State, Jim Smith, Secretary of State

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: Willoughby Golf Club, Inc.  
1300 S. E. Indian Street, Stuart, FL 34997

1b. Date of incorporation 11/8/88 Document number N29190

2. The name and address of the current registered agent and office:

Stephen E. Winch

1300 S. E. Indian Street, Stuart, FL 34997

3. The name and address of the new registered agent and office:  
 (P.O. Box Not Acceptable)

William M. Dean

585 N. E. Ocean Blvd, Stuart, FL 34996

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

*Steven C. Lewis*  
 SIGNATURE  
 October 21, 1997  
 DATE

Steven C. Lewis, Secretary/Treasurer  
 Typed or printed name and title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE *William M. Dean*  
 (Registered Agent)  
 DATE October 21, 1997

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

FILING FEE: \$35.00

APPROVED  
AND  
FILED

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA