

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JENNIFER W. MATHIAS
COMMISSIONER OF STATE
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
4/23/96

MAY 1 1996 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N29248** (4)

TARA GOLF AND COUNTRY CLUB, INC.

Principal Office Location: ~~C/O DONALD LEWELLYN - DELETE~~
2666 AIRPORT ROAD SOUTH
NAPLES FL 33962

Mailing Address: ~~C/O DONALD LEWELLYN - DELETE~~
2666 AIRPORT ROAD SOUTH
NAPLES FL 33962

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 11/14/1988	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0120044	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Global Business <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Has the corporation been in the U.S. for 12 months? <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS letter of Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for a sample fee under § 199.063, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Office of Employees 21	20. Mailing Address 26
State, Apt. # or P.O. 22	State, Apt. # or P.O. 27
City & State 23	City & State 28
Country 24	Country 30

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HIGGS, WILLIAM T. 2666 AIRPORT ROAD SOUTH NAPLES FL 33962		B1. Name	
		B2. Street address (P.O. Box Number is Not Acceptable)	
		B3. City	
		B4. State	FL
		B5. Zip Code	

11. Pursuant to the provisions of Sections 607.02(1) and 607.02(2), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent for both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the responsibilities of the holder of such Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. REGISTERED AGENTS	
NAME	ADDRESS	NAME	ADDRESS
PD HIGGS, WILLIAM T. 2666 AIRPORT RD. SOUTH NAPLES FL			
DVS HIGGS, ANTONIA 2666 AIRPORT RD S. NAPLES FL			
DVT SPEHRIT, SUSAN 2666 AIRPORT RD S. NAPLES FL		DVT SPEHRIT, SUSAN 2666 AIRPORT RD SOUTH NAPLES, FL 33962	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not equally for the exemption stated in Sections 199.063, Florida Statutes. I further certify that this information is filed in this annual report or supplementary annual report as 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 of the registered office or registered agent of the corporation as reported by the corporation and that my name appears in Block 12 or Block 13 of this report as the name of the registered office or registered agent.

SIGNATURE: *William T. Higgs*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR