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Apr 30 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N32396

(6)

1. Corporation Name

WENTWORTH GOLF CLUB, INC.



Principal Place of Business

Mailing Address

% PRESIDENTIAL DEVELOPMENT CORP.  
2990 WENTWORTH WAY  
TARPON SPRINGS FL 34689% PRESIDENTIAL DEVELOPMENT CORP.  
2990 WENTWORTH WAY  
TARPON SPRINGS FL 34689-84283. Date Incorporated or Qualified  
05/19/19893a. Date of Last Report  
06/19/1996

2. Principal Place of Business

2a. Mailing Address

21 2990 Wentworth Way

26 2990 Wentworth Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Tarpon Springs, FL

28 Tarpon Springs, FL

Zip

Country

Zip

Country

24 34689

25 USA

29 34689

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TEW, JOEL R., ESQ.  
TEW, ZINOBER & BARNES  
2655 MCCORMICK DR.  
CLEARWATER FL 34619

81 Name Richard Zaccur, Esquire

82 Street Address (P.O. Box Number is Not Acceptable)

83 5200 Central Avenue

84 City St. Petersburg

FL

85 Zip Code 33707

11. Pursuant to the provisions of Sections 617.050 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 617.0508, Florida Statutes.

SIGNATURE

Richard Zaccur

4-18-97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME NOONAN, JOHN, M.  
STREET ADDRESS 6603 W. BROAD ST.  
CITY-ST-ZIP RICHMOND VA 232301.1 TITLE PD  
1.2 NAME Edward Pearce  
1.3 STREET ADDRESS 2990 Wentworth Way  
1.4 CITY-ST-ZIP Tarpon Springs, FL 34689TITLE VD  
NAME LIBUTTI, L. DANIEL  
STREET ADDRESS 4501 N.W. 31ST AVE.  
CITY-ST-ZIP FT. LAUDERDALE FL2.1 TITLE STD  
2.2 NAME Cynthia Morris  
2.3 STREET ADDRESS 2990 Wentworth Way  
2.4 CITY-ST-ZIP Tarpon Springs, FL 34689TITLE STD  
NAME KEENER, DENNIS  
STREET ADDRESS 2990 WENTWORTH WAY  
CITY-ST-ZIP TARPON SPRINGS FL3.1 TITLE MD  
3.2 NAME Ross Weaver  
3.3 STREET ADDRESS 2990 Wentworth Way  
3.4 CITY-ST-ZIP Tarpon Springs, FL 34689TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-21-97 813.942.4760

Date Daytime Phone # 0069065

CR2E037 (9/96)