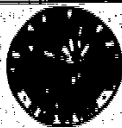


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Montherm
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N39674 (9)

1. Corporation Name

IBIS GOLF AND COUNTRY CLUB, INC.

Principal Place of Business

Mailing Address

**C/O E LLWYD ECCLESTONE, JR.
1555 PALM BEACH LAKES BLVD.
WEST PALM BEACH FL 33401**

**C/O E LLWYD ECCLESTONE, JR.
1555 PALM BEACH LAKES BLVD.
WEST PALM BEACH FL 33401**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/23/1990

3a. Date of Last Report

04/20/1994

4. FEI Number

65-0212334

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$0.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ **\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt., #, etc.

2a Suite, Apt., #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ECCLESTONE, E. LLWYD, JR.
1555 PALM BEACH LAKES BLVD.
SUITE 1100
WEST PALM BEACH FL 33401**

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 607.1506, 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CD**
NAME **ECCLESTONE, E LLWYD, JR**
STREET ADDRESS **1555 PALM BEACH LKS BLVD**
CITY- ST- ZIP **WEST PALM BEACH FL**

TITLE **VPD**
NAME **ECCLESTONE, E LLWYD, JR**
STREET ADDRESS **1555 PALM BEACH LKS BLVD**
CITY- ST- ZIP **WEST PALM BEACH FL**

TITLE **PD**
NAME **WRIGHT, COLIN**
STREET ADDRESS **1555 PALM BEACH LKS BLVD**
CITY- ST- ZIP **WEST PALM BEACH FL**

TITLE **S**
NAME **LEYENOECKER, HELENA**
STREET ADDRESS **1555 PALM BEACH LKS BLVD**
CITY- ST- ZIP **WEST PALM BEACH FL**

TITLE **T**
NAME **COOPER, RON**
STREET ADDRESS **1555 PALM BEACH LKS BLVD**
CITY- ST- ZIP **WEST PALM BCH FL**

TITLE **EP**
NAME **JERMAN, RICHARD A**
STREET ADDRESS **1555 PALM BCH LAKES BLVD., STE 1100**
CITY- ST- ZIP **W PALM BCH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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: Ron Cooper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/95

Date

407/686-2000

Daytime Phone #