FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY 11 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N49678** (8)

1. Corporation Name

BIG BEND JUNIOR GOLF ASSOCIATION, INC.

Principal Place of Business	Mailing Address
13009 GOPHER WOOD TRAIL TALLAHASSEE FL 32312 US	1400 VILLAGE SQUARE BLVD. STE. 3-171 TALLAHASSEE FL 32312 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/02/1992
3a. Date of Last Report: 07/01/1994
4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

5. Certificate of Status Desired ☐ **$8.75** 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LANFORD, ERNEST E 13039 GOPHER WOOD TRAIL TALLAHASSEE FL 32312	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 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	LANFORD, ERNEST E	12 NAME	
STREET ADDRESS	13039 GOPHER WOOD TRAIL	13 STREET ADDRESS	
CITY ST ZIP	TALLAHASSEE FL	14 CITY ST ZIP	
TITLE	VPD	21 TITLE	☐ Change ☐ Addition
NAME	ZIMMER, BILL	22 NAME	
STREET ADDRESS	2505 DEBDEN CT.	23 STREET ADDRESS	
CITY ST ZIP	TALLAHASSEE FL	24 CITY ST ZIP	
TITLE	PD	31 TITLE	☐ Change ☐ Addition
NAME	DAVEY, KEVIN	32 NAME	
STREET ADDRESS	3709 WICKLOW CIR.	33 STREET ADDRESS	
CITY ST ZIP	TALLAHASSEE FL	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	FUTRELL, MIKE	42 NAME	
STREET ADDRESS	7064 VALLEY RD.	43 STREET ADDRESS	
CITY ST ZIP	TALLAHASSEE FL	44 CITY ST ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, VAN	52 NAME	
STREET ADDRESS	6012 OX BOTTOM MANOR RD.	53 STREET ADDRESS	
CITY ST ZIP	TALLAHASSEE FL	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	MIDDLEBROOKS, DAN	62 NAME	
STREET ADDRESS	1905 S. MONROE ST.	63 STREET ADDRESS	
CITY ST ZIP	TALLAHASSEE FL 32301	64 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)(k), 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: Ernest E. Lanford May 8, 1995 Date 644-2281 (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0027567