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Jun 18 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N49678 (8)

1. Corporation Name

BIG BEND JUNIOR GOLF ASSOCIATION, INC.

Principal Place of Business

13039 GOPHER WOOD TRAIL  
TALLAHASSEE FL 32312  
US

Mailing Address

1400 VILLAGE SQUARE BLVD.  
STE. 3-171  
TALLAHASSEE FL 32312-1250  
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current 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

3. Date Incorporated or Qualified  
07/02/1992

3a. Date of Last Report  
05/01/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

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

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 617.0502 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 617.0503, 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 ☐ DELETE

NAME LANFORD, ERNEST E  
STREET ADDRESS 13039 GOPHER WOOD TRAIL  
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME ZIMMER, BILL  
STREET ADDRESS 2505 DEBDEN CT.  
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME DAVEY, KEVIN  
STREET ADDRESS 3709 WICKLOW CIR.  
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME FUTRELL, MIKE  
STREET ADDRESS 7084 VALLEY RD.  
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME JOHNSON, VAN  
STREET ADDRESS 6012 OX BOTTOM MANOR RD.  
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME MIDDLEBROOKS, DAN  
STREET ADDRESS 1905 S. MONROE ST.  
CITY-ST-ZIP TALLAHASSEE FL 32301

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 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.

CR2E037 (9/96)