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Jun 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N50853
1. Corporation Name

APALACHEE COURSING CLUB, INC.

Principal Place of Business
1023 Canarvon DR
Tallahassee, FL 32311
US

Mailing Address
SAME

3. Date Incorporated or Qualified
09/14/1992

4. FEI Number
59-3237628

Applied For
☐ Yes ☒ Not Applicable

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

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. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Wenhold, Fran
1023 Canarvon DR
Tallahassee, FL 32311

10. Name and Address of New Registered Agent

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 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 Fran Wenhold FRAN WENHOLD 6/15/98
(Signature typed or printed name of registered agent and file if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS	
TITLE	D ☒ DELETE
NAME	Farrar, Elise M.
STREET ADDRESS	9301 Rose RD
CITY-ST-ZIP	Tallahassee, FL
TITLE	T ☒ DELETE
NAME	Jackson, Dale R.
STREET ADDRESS	6416 Dancer's Image TR Tall., FL
CITY-ST-ZIP	
TITLE	D ☐ DELETE
NAME	Davis, Glen
STREET ADDRESS	1578 Gainey RD Cairo, GA
CITY-ST-ZIP	
TITLE	VP D ☐ DELETE
NAME	Davis, Pam / Cigolle, Tom J.
STREET ADDRESS	1578 Gainey RD Apt RT, 2 Box 4140
CITY-ST-ZIP	Cairo, GA / Quincy, FL
TITLE	S ☐ DELETE
NAME	Wenhold, Fran
STREET ADDRESS	1023 Canarvon DR Tall., FL
CITY-ST-ZIP	
TITLE	P ☒ DELETE
NAME	Farrar, B. Elise
STREET ADDRESS	9301 Rose RD
CITY-ST-ZIP	Tall., FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	T ☒ Change ☐ Addition
1.2 NAME	Farrar, Elise M.
1.3 STREET ADDRESS	9301 Rose RD
1.4 CITY-ST-ZIP	Tallahassee, FL
2.1 TITLE	D ☒ Change ☐ Addition
2.2 NAME	Jackson, Dale R.
2.3 STREET ADDRESS	6416 Dancer's Image TR Tall., FL
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	P
6.3 STREET ADDRESS	Farrar, B. Elise
6.4 CITY-ST-ZIP	5420 WW Kelly RD Tallahassee, FL

14. I 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: Fran Wenhold FRANCES A. WENHOLD 5/31/98

CR2E037 (10/97)