

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90068 013 ****61.25

DOCUMENT # N95000001844

1. Corporation Name

LAKE COUNTY SENIOR GOLF CORPORATION

Principal Place of Business

Mailing Address

~~25126 BETTON HILL~~
~~LEESBURG FL 34740~~
~~US~~

~~25126 BETTON HILL~~
~~LEESBURG FL 34740~~
~~US~~



2. Principal Place of Business

2a. Mailing Address

21 5240 Magnolia Terr.
Suite, Apt. #, etc.

26 5240 Magnolia Terr.
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

04/13/1995

4. FEI Number

59-3198258

Applied For

Not Applicable

City & State

23 Fruitland Park FL.

City & State

28 Fruitland Park FL.

Zip

Country

24 34731

25 US

Zip

Country

29 34731

30 US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

CLARK, HARRY R.
25126 BETTON HILL
LEESBURG FL 34740

10. Name and Address of New Registered Agent

81 Name

HARRY R. CLARK

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

83

5240 Magnolia Terr.

84

Fruitland Park FL

85

Zip Code
34731

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

4/29/99

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE PD
NAME BELL, EDMUND R
STREET ADDRESS 17820 SE 106TH CT
CITY-ST-ZIP SUMMERFIELD FL 34491

TITLE VD
NAME THOMAS, WILLIAM J JR
STREET ADDRESS 9601 SE 174TH LOOP
CITY-ST-ZIP SUMMERFIELD FL 34491

TITLE STD
NAME CLARK, HARRY R.
STREET ADDRESS 25126 BETTON HILL
CITY-ST-ZIP LEESBURG FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARRY R. CLARK

4/29/99

352/326-2350

Date

Daytime Phone #

CR2E037 (11/98)