## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # N9500002052 (7)

EQUITY MEMBERS OF WYCLIFFE COUNTRY CLUB, INC.

Principal Place of Business Mailing Address AKE WORTH RD 4835 EXETER ESTATE LANE SUITE 303 **SUITE 1200** LAKE WORTH FL 33467-2536 LAKE WORTH FL 33467 Date Incorporated or Qualified 05/01/1995 3a. Date of Last Report 04/11/1996 US 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For (40411/ 56-1182521 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be MOBITH CAKE Trust Fund Contribution 23 28 Added to Fees Zip Country Country This corporation has liability for intangible tex under s. 199.032, PAUM Yes V No Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LAWRENCE GIÙDAN, PHILLIPS Street Address (P.O. Box Number is Not Acceptable) 82 NW 1645 PALM BEACH LAKES BLVD. **SUITE 1200** 83 SUITE 401 W. PALM BEACH FL 33401 85 Zip Code BOCA RATON 11. Pursuant to the provietors 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 617.0523, Florida Statutes. SIGNATURE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN A 12. 13. (96.6) (5) TIFLE DELETE 1.1 TITLE ☐ Change Addition STANLEY BASS **MURRAY WARREN** NAME 1.2 NAME BARCUAF FAIR WAY 44-15 4835 EXETER ESTATE LANE STREET ADORESS 1.3 STREET ADORESS LAKE WORTH FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE **HOWARD KRONHAUS** NAME 2.2 NAME 4876 EXETER ESTATE LANE STREET ADDRESS 2.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE Addition ROBINSON, MURAY NAME 3.2 NAME 4840 EXETER ESTATE LANE STREET ADDRESS 3.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 3.4. CffY-ST-ZIP DELETE Change Addition THILE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-7/P 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 13 if changed, or on an attachment with an address.

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Daytime Phone # 0044116