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**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90290 001 \*\*\*\*61.25

|                                                 |                                                                                   |                                                                                                                 |
|-------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| <b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b> |  | <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Katherine Harris</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|-------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|

**DOCUMENT # N95000002052**

1. Corporation Name

**EQUITY MEMBERS OF WYCLIFFE COUNTRY CLUB, INC.**

Principal Place of Business

~~4835 EXETER ESTATE LANE~~~~SUITE 4200~~~~LAKE WORTH FL 33467~~~~483~~

Mailing Address

 P.O. BOX 54012  
 LAKE WORTH FL 33454  
 US


|                                |  |                     |  |                                                           |  |
|--------------------------------|--|---------------------|--|-----------------------------------------------------------|--|
| 2. Principal Place of Business |  | 2a. Mailing Address |  | 3. Date Incorporated or Qualified                         |  |
| 21 4653 Hazelton Lane          |  | 26                  |  | 05/01/1995                                                |  |
| Suite, Apt. #, etc.            |  | Suite, Apt. #, etc. |  | 4. FEI Number                                             |  |
| 22                             |  | 27                  |  | 56-1182521                                                |  |
| City & State                   |  | City & State        |  | 5. Certificate of Status Desired <input type="checkbox"/> |  |
| 23 Lake Worth FL               |  | 28                  |  | \$8.75 Additional Fee Required                            |  |
| Zip                            |  | Country             |  | 6. Election Campaign Financing                            |  |
| 24 33467                       |  | 25 Palm Beach       |  | Trust Fund Contribution <input type="checkbox"/>          |  |
| Country                        |  | Country             |  | \$5.00 May Be Added to Fees                               |  |
| 29                             |  | 30                  |  |                                                           |  |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

 ROBINSON, MURRAY  
 4835 EXETER ESTATE LANE  
 LAKE WORTH FL 33467

 81 Name Norman Samuels  
 82 Street Address (P.O. Box Number is Not Acceptable) 4653 Hazelton Lane  
 83  
 84 City Lake Worth, FL FL 85 Zip Code 33467

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 file if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

| 12. OFFICERS AND DIRECTORS |                         | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                          |
|----------------------------|-------------------------|-------------------------------------------------------|--------------------------|
| TITLE                      | PD MURRAY WARREN        | 1.1 TITLE                                             | President - D            |
| NAME                       | 4835 EXETER ESTATE LANE | 1.2 NAME                                              | Norman Samuels           |
| STREET ADDRESS             | LAKE WORTH FL           | 1.3 STREET ADDRESS                                    | 4653 Hazelton Lane       |
| CITY-ST-ZIP                | LAKE WORTH FL           | 1.4 CITY-ST-ZIP                                       | Lake Worth, FL 33467     |
| TITLE                      | DS ROBINSON, MURAY      | 2.1 TITLE                                             | Secretary - D            |
| NAME                       | 4840 EXETER ESTATE LANE | 2.2 NAME                                              | Leonard Epstein          |
| STREET ADDRESS             | LAKE WORTH FL           | 2.3 STREET ADDRESS                                    | 4397 Kensington Park Way |
| CITY-ST-ZIP                | LAKE WORTH FL           | 2.4 CITY-ST-ZIP                                       | Lake Worth, FL 33467     |
| TITLE                      | TD BASS, STANLEY - D    | 3.1 TITLE                                             |                          |
| NAME                       | 4425 BARCLAY FAIRWAY    | 3.2 NAME                                              |                          |
| STREET ADDRESS             | LAKE WORTH FL           | 3.3 STREET ADDRESS                                    |                          |
| CITY-ST-ZIP                | LAKE WORTH FL           | 3.4 CITY-ST-ZIP                                       |                          |
| TITLE                      |                         | 4.1 TITLE                                             | Vice President - D       |
| NAME                       |                         | 4.2 NAME                                              | Melvin Uttan             |
| STREET ADDRESS             |                         | 4.3 STREET ADDRESS                                    | 4413 Kensington Park Way |
| CITY-ST-ZIP                |                         | 4.4 CITY-ST-ZIP                                       | Lake Worth, FL 33467     |
| TITLE                      |                         | 5.1 TITLE                                             |                          |
| NAME                       |                         | 5.2 NAME                                              |                          |
| STREET ADDRESS             |                         | 5.3 STREET ADDRESS                                    |                          |
| CITY-ST-ZIP                |                         | 5.4 CITY-ST-ZIP                                       |                          |
| TITLE                      |                         | 6.1 TITLE                                             |                          |
| NAME                       |                         | 6.2 NAME                                              |                          |
| STREET ADDRESS             |                         | 6.3 STREET ADDRESS                                    |                          |
| CITY-ST-ZIP                |                         | 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:

 STANLEY BASS  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CRZE037 (11/98)