

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000003273

FILED
Apr 09, 2002 8:00 AM
Secretary of State

Entity Name: CHEVAL GOLF AND COUNTRY CLUB, INC.

Current Principal Place of Business:

4312 CHEVAL BLVD
LUTZ, FL 33549 US

New Principal Place of Business:

4312 CHEVAL BLVD
LUTZ, FL 33558 US

Current Mailing Address:

4312 CHEVAL BLVD
LUTZ, FL 33549 US

New Mailing Address:

4312 CHEVAL BLVD
LUTZ, FL 33558 US

FEI Number: 59-3459659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, CATHERINE L
4312 CHEVAL BLVD
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

CAMPBELL, CATHERINE L
4312 CHEVAL BLVD
LUTZ, FL 33558 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CATHERINE L. CAMPBELL

04/09/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARMER, ROHN
Address: 5203 AVENUE LACROSSE
City-St-Zip: LUTZ, FL 33549

Title: V () Delete
Name: ABLEIDINGER, ROBERT
Address: 4529 CHEVAL BLVD
City-St-Zip: LUTZ, FL 33549

Title: V () Delete
Name: HAMMERMAN, HOWARD
Address: 3601 MADACA LANE
City-St-Zip: TAMPA, FL 33619

Title: TS () Delete
Name: WOHLWEND, HAROLD
Address: 18822 RUE LOIRE
City-St-Zip: LUTZ, FL 33549

Title: D () Delete
Name: MCGUINNESS, DOUG
Address: 18801 RUE LOIRE
City-St-Zip: LUTZ, FL 33549

Title: D () Delete
Name: THOMSON, LINDA
Address: 18929 MAISONS DR
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: HARMER, ROHN
Address: 5203 AVENUE LACROSSE
City-St-Zip: LUTZ, FL 33558

Title: P (X) Change () Addition
Name: ABLEIDINGER, ROBERT
Address: 4529 CHEVAL BLVD
City-St-Zip: LUTZ, FL 33558

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TS (X) Change () Addition
Name: PICKERILL, JIM
Address: 19115 ST. EMILION CT.
City-St-Zip: LUTZ, FL 33558

Title: D (X) Change () Addition
Name: MCGUINNESS, DOUG
Address: 18801 RUE LOIRE
City-St-Zip: LUTZ, FL 33558

Title: D (X) Change () Addition
Name: THOMSON, LINDA
Address: 18929 MAISONS DR
City-St-Zip: LUTZ, FL 33558

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT ABLEIDINGER

P

04/09/2002

Electronic Signature of Signing Officer or Director

Date

CHRISTOPHER FROST DIRECTOR
18715 CHAVILLE RD.
LUTZ, FL 33558