

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000003273

FILED
Apr 23, 2003
Secretary of State

Entity Name: CHEVAL GOLF AND COUNTRY CLUB, INC.

Current Principal Place of Business:

4312 CHEVAL BLVD
LUTZ, FL 33558 US

New Principal Place of Business:

Current Mailing Address:

4312 CHEVAL BLVD
LUTZ, FL 33558 US

New Mailing Address:

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 33558 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: WHITT, MALGUM
Address: 18607 AVENUE CAPRI
City-St-Zip: LUTZ, FL 33558

Title: D (X) Change () Addition
Name: FROST, CHRISTOPHER
Address: 18715 CHAVILLE RD
City-St-Zip: LUTZ, FL 33558

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

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

Title: D (X) Change () Addition
Name: BROWN, TONY
Address: 4706 RUE BORDEAUX
City-St-Zip: LUTZ, FL 33558

Title: S (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: JIM PICKERILL

P

04/23/2003

Electronic Signature of Signing Officer or Director

Date

ALAN BENSON - DIRECTOR
18802 WIMBLEDON CIRCLE
LUTZ, FL 33558