

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

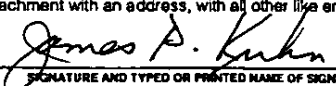
FILED
Mar 14, 2005 8:00 am
Secretary of State

02-22-2005 90022 006 ****61.25

66005069



1st MOORE CR2E037 (10/04)

DOCUMENT # N98000003196					
1. Entity Name CLAY COUNTY GOLF CLASSIC, INC.					
Principal Place of Business 2729 COUNTY ROAD 218 PENNEY FARMS FL 32079			Mailing Address PO Box 515 2729 COUNTY ROAD 218 PENNEY FARMS FL 32079		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 59-3517823				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KUHN, JAMES P 2729 COUNTY ROAD 218 PENNEY FARMS FL 32079			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 			DATE Feb 16, 2005		
FILE NOW FEE IS \$61.25 Due By May 1, 2005			9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DP	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	KUHN, JAMES P		NAME		
STREET ADDRESS	2729 COUNTY ROAD 218		STREET ADDRESS		
CITY-ST-ZIP	PENNEY FARMS FL 32079		CITY-ST-ZIP		
TITLE	DV	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SGROI, STEPHEN B		NAME		
STREET ADDRESS	2729 COUNTY ROAD 218		STREET ADDRESS		
CITY-ST-ZIP	PENNEY FARMS FL 32079		CITY-ST-ZIP		
TITLE	DS	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BROUGH, FRANK		NAME		
STREET ADDRESS	2729 COUNTY ROAD 218		STREET ADDRESS		
CITY-ST-ZIP	PENNEY FARMS FL 32079		CITY-ST-ZIP		
TITLE	DT	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	TEDDER, ROGER		NAME		
STREET ADDRESS	2729 COUNTY ROAD 218		STREET ADDRESS		
CITY-ST-ZIP	PENNEY FARMS FL 32079		CITY-ST-ZIP		
TITLE	DTS	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	VANN, MARGARET L		NAME		
STREET ADDRESS	2729 COUNTY ROAD 218		STREET ADDRESS		
CITY-ST-ZIP	PENNEY FARMS FL 32079		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			James P. Kuhn 3-11-05 904-545-9686		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		