PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P15826

CONTINENTAL COUNTRY CLUB REALTY, INC.

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Principal Place	of Business	Mailing A	Address			1 124(04) (07)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		• • • • • • • • • • • • • • • • • • • •	
50 CONTINENTA	NL BLVD	50 CONTI	NENTAL BLVD							
BOX 101		BOX 101				DO NOT	DO NOT WRITE IN THIS SPACE			
WILDWOOD FL	34785-6782		WILDWOOD FL 34785-6782				3. Date Incorporated or Qualifed			
us us						'	iii GG			
		1 0 4 11				09/04/1987 4. FEI Number		Anr	olied For	
2. Principal Pl	ace of Business		2a. Mailing Address					· +	Applicable	
21		26				75-2188155		_\$8.7.5.A		
Suite, Apt. :	#, etc.	— <u> </u>	Suite, Apt. #, etc.			5. Certifcate of Status Desir	ed 🔲	Fee Red		
22		27 City	City & State			C. Flanka Caracian Finan		\$5.00		
City & State		— ·	⊢ '			6. Election Campaign Finan Trust Fund Contribution		Added to		
Zip Country			Zip Country			8. This corporation owes the current year Intangible				
Zip	,	<u></u>	F.	30	u y	Personal Property Tax.	, current year in		□No	
24	9. Name and Address of Cu	29		30 I	_	10. Name and Address of N	lew Registered			
	5. Name and Address of Cu	rient Keyistered	Agent		81 Name					
OWENS, KENNETH						BILL THOMPS	<u> </u>			
114 ROBIN LN			į,	82 Street	Street Address (P.O. Box Number is Not Acceptable)					
WILDWOOD FL-34785				<u> </u>	<u>ර</u> 83	K K B 10 W ICO				
	4.00									
	i.				84 City	1)	FI	L 85 Zip C	ode	
A CONTROL LOCATION PLANT OF LAND						composition submits this statement to				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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									istered	
agent. I am familiar with, and accept the obligations of Section 607.0505, Profital Statutes.										
SIGNATURE Signature trood or printed name of registered agent ago title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									}	
12.	Signature, typed or printed name of registered	agent applica ANO DIRECTOR		13.	igeni signature r	ADDITIONS/CHANGES T		ND DIRECTO	RS IN 12	
TITLE	P	AND DIRECTOR	DELETE	1.1 TITL	F	VP		Change	Addition	
	OWENS, KENNETH		4	1.2 NAM		wacter musply	,			
NAME	· · · · · · · · · · · · · · · · · · ·				REET ADDRESS	15 BUD CATE TRAI	ا <u>د</u>			
STREET ADDRESS	114 ROBIN LN			I .		WILDWOND PL				
CITY-ST-ZIP	WILDWOOD FL		☐ DELETE	2.1 TITL	Y-ST-ZIP	WICEWILD I C	D4 102	Change	Maddition	
TITLE	-85 S		E DELETE					7	_	
NAME [LENAHAN, DAVID			2.2 NAM						
STREET ADDRESS	27 SEMINOLE PATH				EET ADDRESS	-			-	
Crty-St-ZIP	WILDWOOD FL		☐ DELETE	_	Y-ST-ZIP			Change	Addition	
TITLE	D		☐ DEFE IF	3.1 TITI						
NAME	TSCHIDA, WILLIAM			3.2 NA					ļ	
STREET ADDRESS	3401 CALGARY LN.			3.3 STF	REET ADDRESS					
CITY-ST-ZIP	MT. DORA FL 32757				Y-ST-ZIP	PRESIDENT Bill Thomps		Change	Addition	
TITLE	AL P		☐ DELETE	4.1 TiT	.E	PRESIDEN		Change		
NAME	THOMPSON, BILL			4. 2 NA	ME	Rill X Thomps	, ou			
STREET ADDRESS	2 ROBIN RD			4.3 STF	REET ADDRESS					
CITY-ST-ZIP	WILDWOOD FL		More		Y-ST-ZIP			Channe	Addition	
πιε	D		DELETE	5.1 TITE		D mADOON	,	Change	CONTRACTOR SEC	
NAME	GIBSON, RAYMOND		1	5.2 NA		BIG BAR LA	ne			
STREET ADDRESS	67 BIG OAR LN.				REET ADDRESS	61 019				
CITY-ST-ZIP	WILDWOOD FL				Y-ST-ZIP	WILDWIND FC	24781	Channe		
TITLE	T		☐ DELETE	6.1 TITE				Change	☐ Addition	
NAME	WARE, MARVIN			6.2 NA			•		ĺ	
STREET ADDRESS	38 ROBIN RD			6.3 STF	REET ADDRESS					

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 607, 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.

6.4 CITY-ST-ZIP

SIGNATURE:

WILDWOOD FL

FILED

Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90043 021 ***150.00