

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

1-2

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P31336 (1)**

1. Corporation Name

**GRAND CYPRESS FLORIDA, INC.**



Principal Place of Business

Mailing Address

**60 GRAND CYPRESS BLVD.  
215 NORTH EOLA DRIVE  
ORLANDO FL 32836  
US**

**C/O LOWNDES, DROSDICK, DOSTER, ET AL  
215 NORTH EOLA DRIVE  
ORLANDO FL 32801-2028**

3. Date Incorporated or Qualified  
**10/15/1990**

3a. Date of Last Report  
**02/08/1995**

2. Principal Place of Business

2a. Mailing Address

**21 60 Grand Cypress Blvd.,**

**26 60 Grand Cypress Blvd.,**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

**23 Orlando, Florida**

**28 Orlando, Florida**

24 Zip

Country

29 Zip

Country

**24 32836**

**25 U.S.A.**

**29 32836**

**30 U.S.A.**

4. FEI Number

**99-0282163**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**YERGLER, JON C., ESQUIRE  
LOWNDES, DROSDICK, DOSTER, KANTOR & REED  
215 NORTH EOLA DRIVE  
ORLANDO FL 32802**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

|                |                                    |                                 |
|----------------|------------------------------------|---------------------------------|
| TITLE          | DP                                 | <input type="checkbox"/> DELETE |
| NAME           | OSANO, MASAKUNI                    |                                 |
| STREET ADDRESS | #12-4 KAMINOGE 2-CHOME SETAGAYA-KU |                                 |
| CITY-ST-ZIP    | TOKYO 158 JA                       |                                 |
| TITLE          | DEVP                               | <input type="checkbox"/> DELETE |
| NAME           | TAKAHASHI, STANLEY                 |                                 |
| STREET ADDRESS | 905 KAPOHO PLC                     |                                 |
| CITY-ST-ZIP    | HONOLULU HA                        |                                 |
| TITLE          | DS                                 | <input type="checkbox"/> DELETE |
| NAME           | MATSUMOTO, HISASHI                 |                                 |
| STREET ADDRESS | 1717 MOTT-SMITH DR., #2414         |                                 |
| CITY-ST-ZIP    | HONOLULU HA                        |                                 |
| TITLE          | DVP                                | <input type="checkbox"/> DELETE |
| NAME           | HAYAKAWA, GEORGE                   |                                 |
| STREET ADDRESS | 2724 KAHALOHA LANE #2207           |                                 |
| CITY-ST-ZIP    | HONOLULU HA                        |                                 |
| TITLE          | SVP                                | <input type="checkbox"/> DELETE |
| NAME           | RICE, DAVID                        |                                 |
| STREET ADDRESS | 9036 CHARLES E LIMPUS RD           |                                 |
| CITY-ST-ZIP    | ORLANDO FL                         |                                 |
| TITLE          | VP                                 | <input type="checkbox"/> DELETE |
| NAME           | ISHIBASHI, MASATSUGU               |                                 |
| STREET ADDRESS | 11318 WINSTON WILLOW COURT         |                                 |
| CITY-ST-ZIP    | WINDEREMERE FL                     |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |   |
|--------------------|---|
| 1.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           |   |
| 1.3 STREET ADDRESS | <b>*** Please see the attached list ***</b>                       |
| 1.4 CITY-ST-ZIP    |   |
| 2.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME           |   |
| 2.3 STREET ADDRESS | <b>*** Please see the attached list ***</b>                       |
| 2.4 CITY-ST-ZIP    |   |
| 3.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           |   |
| 3.3 STREET ADDRESS | <b>*** Please see the attached list ***</b>                       |
| 3.4 CITY-ST-ZIP    |   |
| 4.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME           |   |
| 4.3 STREET ADDRESS | <b>*** Please see the attached list ***</b>                       |
| 4.4 CITY-ST-ZIP    |   |
| 5.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME           |   |
| 5.3 STREET ADDRESS | <b>*** Please see the attached list ***</b>                       |
| 5.4 CITY-ST-ZIP    |   |
| 6.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME           |   |
| 6.3 STREET ADDRESS | <b>*** Please see the attached list ***</b>                       |
| 6.4 CITY-ST-ZIP    |   |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

**SIGNATURE:**

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Mitoune Phiboon DVP

**April 29, 1996**

Date

**407-239-1951**

Daytime Phone #

CR2E034 (12/95)

# Grand Cypress Resort®

Grand Cypress Florida, Inc. ♦ 60 Grand Cypress Boulevard ♦ Orlando, Florida 32836  
(407) 239-4600 ♦ Fax (407) 876-5580

## LIST OF OFFICERS AND DIRECTORS

As of April 29, 1996

Document # P31336(1)

1. Corporate Name:  
Grand Cypress Florida, Inc.

### Block 12 & 13

| <u>Title</u> | <u>Name</u>          | <u>Street Address, City, St. Zip</u>                        |
|--------------|----------------------|---|
| DP           | Osano, Masakuni      | #12-4, Kaminoge 2-chome, Setagaya-ku,<br>Tokyo 158 JA       |
| DEVP         | Takahashi, Stanley   | 905 Kapoho Place,<br>Honolulu, Hawaii 96825                 |
| DVPT         | Ebisawa, Mitsuzo     | 1245 North Park Avenue,<br>Winter Park, Florida 32789-2541  |
| DVP          | Tomoda, Nakaichi     | #14-1, Suehiro-cho,<br>Sakato-city, Saitama, JA             |
| DVP          | Hayakawa, George     | 1040 Lunalilo Street, PH-3<br>Honolulu, Hawaii 96822        |
| DVP          | Kochi, David         | One North Jacaranda, Suite 2031<br>Orlando, Florida 32836   |
| DS           | Matsumoto, Hisashi   | 1717 Mott-Smith Drive, Suite 2414<br>Honolulu, Hawaii 96822 |
| SVF          | Rice, David          | 9036 Charles E Limpus Road,<br>Orlando, Florida 32836       |
| VP           | Ishibashi, Masatsugu | 11318 Winston Willow Court,<br>Windermere, Florida 34786    |

THE VILLAS OF GRAND CYPRESS  
HYATT REGENCY GRAND CYPRESS  
GRAND CYPRESS ACADEMY OF GOLF



GRAND CYPRESS GOLF CLUB  
GRAND CYPRESS RACQUET CLUB  
GRAND CYPRESS EQUESTRIAN CENTER

MORE GRAND THAN YOU EVER IMAGINED.