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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P93000080530 (7) DOCUMENT # MARION CREEK HUNT CLUB, INC. Principal Place of Business Mailing Address 4545 PLEASANT HILL ROAD 4545 PLEASANT HILL ROAD STE. 114 STF. 114 KISSIMMEE FL 34759 KISSIMMEE FL 34759 3. Date Incorporated or Qualified 3a. Date of Last Report 11/17/1993 05/01/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3212507 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired XXXXX 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Ζiρ Country Country Zip 8. This corporation has liability for intangible tax under s 199,032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name FISCHER, MARGARET H 82 Street Address (P.O. Box Number is Not Acceptable) 4545 PLEASANT HILL ROAD 83 STE - 114 KIŞSIMMEE FL 34759 City 84 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE THILE 1. 1 TITLE ☐ Change ☐ Addition FISCHER, LOUIS E NAME 1.2 NAME 4545 PLEASANT HILL ROAD STE. 114 STHEET ADDRESS 1.3 STREET ADDRESS KISSIMMEE FL 34759 CITY-S1-ZIP 1.4 City - ST - ZIP TITLE □ DELETE 2 1 TITLE Change [ ] Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE □ DELETE 3. 1 TITLE Change Addition 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY - ST - ZIP 34 CITY-ST-ZIP TITLE DELETE ☐ Change 4 1 TITLE Addition NAME 42 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST- ZIF 4.4 CITY-ST-ZIP DELETE TITLE 5 1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY-ST-ZIP THEE □ DELETE 6 1 TITLE Change ☐ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 | am an officer or director of the deprovation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an officer or direction appears in Block 12 or Block 13 an attachment with an address

SIGNATURE:

MARGARET H. FISCHER O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96

407/847-9700

Daytinie Phone it

(12/95)CR2E034