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Mar 08, 1999 8:00 am  
Secretary of State

03-08-1999 90042 040 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000028885

1. Corporation Name

PARADISE GOLF LIMITED, INC.

Principal Place of Business

936 N. COLLIER BLVD.  
COLLIER PLAZA  
MARCO ISLAND FL 33937  
US

Mailing Address

936 N. COLLIER BLVD.  
COLLIER PLAZA  
MARCO ISLAND FL 33937  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1994

4. FEI Number

65-0482259

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 owes the current year intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 571 S. COLLIER BLVD

Suite, Apt. #, etc.

22 SECOND FLOOR

City & State

23 MARCO ISLAND, FL

Zip

24 34145

Country

25 USA

2a. Mailing Address

26 P O Box 2452

Suite, Apt. #, etc.

27

City & State

28 MARCO ISLAND, FL

Zip

29 34146

Country

30

9. Name and Address of Current Registered Agent

STONIER, R.  
936 N COLLIER BLVD.  
MARCO ISLAND FL 34145

10. Name and Address of New Registered Agent

81 Name

R. STONIER

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

571 S. COLLIER BLVD

83

2nd FLOOR

84 City

MARCO ISLAND FL

85 Zip Code

34145

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

Rhonda G. Stonier

(NOTE: Registered Agent signature required when reinstating)

DATE

3/4/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME STONIER, DAVID R  
STREET ADDRESS 1024 ANGLER'S COVE #208  
CITY-ST-ZIP MARCO ISLAND FL 33937

TITLE D ☐ DELETE

NAME STONIER, RHONDA G  
STREET ADDRESS 1024 ANGLER'S COVE #208  
CITY-ST-ZIP MARCO ISLAND FL 33937

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DVC-PRESIDENT ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE PRESIDENT ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE:

Rhonda G. Stonier

RHONDA G. STONIER

Date

3/4/99

Daytime Phone #

941-344-5830

CR2E034 (11/98)