FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000046431 1. Corporation Name

PUBLIC GOLF DEVELOPMENT CORP.

Frincipal Flace of Busil
1001 N FEDERAL HWY
LAKE WORTH FL 33480

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90233 045 ***150.00



Principal Place of Business		Mailing Address						
1001 n Federal Hwy Lake worth Fl 33480		1001 N FEDERAL HWY LAKE WORTH FL 33460			DO NOT WRITE IN THIS	SPACE	<u> </u>	
					3. Date incorporated or Qualifed 06/17/1994			
2. Principal Place	e of Business	2a. Mailing Address			4. FEI Number		Applied For	
4		26	6		NOT APPLICABLE		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees	
Zip	Country 25	Zip Country 29 30		,	8. This corporation owes the current year Intangible Personal Property Tax.			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
CASE	DOV		81	Name				
CASE, ROY 1001 N FEDERAL HWY LAKE WORTH FL 33460			82	82 Street Address (P.O. Box Number is Not Acceptable)				
			83	13				
			84	City	FL	85	Zip Code	
office or regi	stered agent, or both, in the St	0502 and 607.1508, Florida Statutes, the ate of Florida. Such change was authorize digations of, Section 607.0505, Florida Sta	d by	the corporation?	ation submits this statement for the purpose of s board of directors. I hereby accept the appo	changir intment	ng its registered as registered	

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature required	I when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CASE, ROY	1.2 NAME	
STREET ADDRESS	1001 N FEDERAL HWY	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33460	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADORESS	
CITY-ST-ZIP		2. 4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4 3 STREET ADORESS	
CITY-ST-ZIP		4 4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	•
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETÉ	6.1 TITLE	Change Addition
NAME		6.2 NAME	ł
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	2. June 440 07/03/13 Florida Ctatutas I further contifu that the information

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 informati 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 open extachment with an address, with all other like empowered.

SIGNATURE: