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Apr 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000081780 (6)

1. Corporation Name

USA GOLF PROPERTIES, INC.

Principal Place of Business

2180 PARK AVE., NORTH
STE 300
WINTER PARK FL 32789
US

Mailing Address

2180 PARK AVE., NORTH
STE 300
WINTER PARK FL 32789-2358
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/08/1994

3a. Date of Last Report

01/25/1996

4. FEI Number

59-3278634

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

HARKINS, RICHARD C
2180 PARK AVE., NORTH
SUITE 300
WINTER PARK FL 32789

← SUITE 300

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	D	<input type="checkbox"/> DELETE
NAME	HARKINS, RICHARD C	
STREET ADDRESS	2180 PARK AVE, NORTH, STE 300	
CITY-ST-ZIP	WINTER PARK FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	HARRIS, BOBBY J	
STREET ADDRESS	28880 WEDGEWOOD DRIVE #304	
CITY-ST-ZIP	BONITA SPRINGS FL 32823	

TITLE	D	<input type="checkbox"/> DELETE
NAME	BLEIL, WILLIAM J	
STREET ADDRESS	1521 SOUTH SHORE DRIVE	
CITY-ST-ZIP	ERIC PA	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MEYER, EDWARD J	
STREET ADDRESS	2180 PARK AVE, NORTH, STE 300	
CITY-ST-ZIP	WINTER PARK FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	RICH, WAYNE A	
STREET ADDRESS	P.O. BOX 1911 N/A	
CITY-ST-ZIP	ORLANDO FL 32806	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BIGNON, EDWARD R	
STREET ADDRESS	5881 CHESAPEAKE PARK	
CITY-ST-ZIP	ORLANDO FL 32819	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	JOHN A. DECHELLIS	
1.3 STREET ADDRESS	7615 PELHAM DR.	
1.4 CITY-ST-ZIP	CHESTERLAND, OH 44026	

2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	R. BRUCE MURRAY	
2.3 STREET ADDRESS	2795 167TH ST	
2.4 CITY-ST-ZIP	SURREY, BRITISH COLUMBIA, CANADA	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	V4B5E7	
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Date

Daytime Phone #

0075849

CR2E034 (9/96)