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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400085582 (2)

FILED Feb 06 1998 8:00am Secretary of State

MONAF	RCH GOLF, INC.				 		
Drive in al Diese	and Division and	A Calling A delay an					
Principal Place of Business Mailing Address						• • • • • • • • • • • • • • • • • • • •	
26000 ACE AVE   26600 ACE AVE   LEESBURG FL 34748   LEESBURG FL 34748					}		
LEESBURG F	C 94740	LEESBURG FL 34/40			DO NOT WRITE IN THIS :	SPACE	
l					3. Date Incorporated or Qualified		٦
					11/21/1994		
<b>⊢</b>	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			59-3282405	Not Applicable	)
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
City & State		Cily & State			Fee Required	4	
23		<u>ት። ነ</u>		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	Ì	
Zip Country		Zip Country		8. This corporation owes or has paid the cur		$\dashv$	
24	25	k	30]			Yes No	
<del></del>	9. Name and Address of Cur		701		10. Name and Address of New Registered		7
SII	MMERS, GARY L ESQ		81	Name			٦
	LLIAMS, SMITHLAND SUMMER	RS PA	82	Changl	Address (P.O. Box Number is Not Acceptable)		_
	D WEST ALFRES ST		62	Street	Address (F.O. Box Number is Not Acceptable)		
	VARES FL 32778		83				
· "`	VALUE I E GELLO			-		75-1 5-5-1	-
1			84	City	FL	85 Zip Code	1
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508, Florida Statutes	s, the above	named	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	changing its registered	7
office or r	registored agent, or both, in the St im familiar with, and accept the ob	ate of Florida. Such change was au digations of, Section 607.0505. Flori	ilhorized by ida Statutes	the corp	poration's board of directors. I hereby accept the app	ointment as registered	
SIGNATURE		<b>3</b>					ł
SIGNATURE	Signature, typod or printed name of registered	agent and the it applicable (NOTE	Hegistered Ager	il signature	requirea whon reinstating) DATE		. 1
12.	<del></del>	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		_  }
TITLE	P	☐ DELETE	1.1 TATEF			Change Addition	1
NAME	PRINGLE, JOHN A.		1.2 NAME				13
STREET ADDRESS	26600 ACE AVE		1.3 STREFT ADDRESS				ij
CITY-ST-ZIP	LEESBURG FL		1.4 CITY - ST - ZIP			F-1 X	}
TITLE	VP	L] DELETE	211111			Change Addition	1
NAME	PRINGLE, MARY R.		2.2 NAM(				1
STREET ADORESS	2660 ACE AVE		2 3 STREET ADDRESS				
CITY-ST-ZIP	LEESBURG FL	DELETE	2 4 CITY-ST-ZIP			Change Addition	_
TITLE	ST STATE OF STATE S	L.J ORLEH	3.1 TITLE			Change Addition	1
NAME STREET INDESCO	PRINGLE, GEORGE D.		3.2 NAME  3.3 STRELT ADDRESS				
STREET ADDRESS	26600 ACE AVE						
CITY-ST-ZIP TITLE	LEESBURG FL	DELETE	3.4. CITY+S1-7IP 4.1 TITLE			Change Addition	4
1		€ DECESE	4. 2 NAME			FT Guarde FT WordHoll	1
NAME PERCET ADDRESS				ADIADEOG			
STREET ADDRESS			4.3 STREET	- 1			1
CITY+ST-ZIP TITLE		DELFTE	4.4 CITY - ST - 7(P) 5.1 TITLE			Change Addition	-
NAME		المام والم	5.1 THE 5.2 NAME		, , ,		1
STREET ADDRESS			5.3 STREET ADDRESS		1.1.1.1		
CITY-ST-ZIP					M.) 2/6/9 V		
TITLE		DELETE	5.4 CITY - S1 - ZIP 6.1 TITLE		TWOIN	Change Addition	1
NAME			6.2 NAME		1000024246:		
STREET ADDRESS			63 STREET A	MUDBLGG	-02/09/980102000	11	
CITY-ST-2IP		64 CITY - S1	ŀ	***450 <b>.</b> 00		Į	
211 21 21			-				

14. Thereby 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 supplientental 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 trusted 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