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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Mar 30 1998 8:00am Secretary of State

1998 DIVISION OF CORPORATIONS DOCUMENT # P95000019043 (5) FLORIDA GOLF & MARINA, INC. Principal Place of Business Mailing Address 1931 SE 32 TERR 1420 SE 3RD ST CAPE CORAL FL 33904 CAPE CORAL FL 33990 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/06/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1505 SE 40th Street 65-0632825 21 26 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be ara/ 23 Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 24 25 29 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name BLAIR, HEIDI 1420 SE 3RD ST 82 Street Address (P.O. SUITE 200 В3 CAPE CORAL FL 33990 84 Zip Code 3390 City FL 000 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named comporation 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE **PSD** 1.1 TITLE Change ERKER, DAGMAR NAME 1.2 NAME STREET ADDRESS **1931 SE 32 TERRACE** 1.3 STREET ADDRESS CAPE CORAL FL 33904 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE VTD 2.1 TITLE **ERKER, GUNTER** NAME 2.2 NAME STREET ADDRESS **1931 SE 32 TERRACE** 2.3 STREET ADDRESS CAPE CORAL FL 33904 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition TITLE DELETE 3.1 TITLE NAME BLAIR, HEIDE **3.2 NAME** 1420 SE 3RD ST STREET ADDRESS 3.3 STREET ADDRESS CAPE CORAL FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE ☐ Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST- ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE:

03-24-98