

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000054594 (3)

1. Corporation Name

NICK PRICE/STEVE SMYERS GOLF COURSE DESIGN GROUP
, INC.



Principal Place of Business

900 SOUTH U.S. HIGHWAY NO. 1
SUITE 201
JUPITER FL 33477

Mailing Address

900 SOUTH U.S. HIGHWAY NO. 1
SUITE 201
JUPITER FL 33477

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

RIDLEY, FRED S
201 N. FRANKLIN STREET
SUITE 2100
TAMPA FL 33602

3. Date Incorporated or Qualified

07/14/1995

3a. Date of Last Report

4. FEI Number

APPLIED FOR

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

10. Name and Address of New Registered Agent

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 607.1503, 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 of registered agent of the corporation

Signature of Registered Agent (Signature required only if changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
Chairman	Steve Smyers	4375 Creek Woods Lane	Mulberry, FL 33860	☐
Sec/Treas.	Michael Lawrence	8933 S. East Marina Bay Dr	Hobe Sound, FL 33455	☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	12. NAME	13. STREET ADDRESS	14. CITY-STATE-ZIP	15. TITLE	16. NAME	17. STREET ADDRESS	18. CITY-STATE-ZIP	19. TITLE	20. NAME	21. STREET ADDRESS	22. CITY-STATE-ZIP	23. TITLE	24. NAME	25. STREET ADDRESS	26. CITY-STATE-ZIP	27. TITLE	28. NAME	29. STREET ADDRESS	30. CITY-STATE-ZIP

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***225.00

06-05-1996 OK

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: p

Michael Lawrence
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/16/96

Date

Secretary of State

CR2E034 (12/95)