PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000054594

1. Corporation Name

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

Principal Place of Business	Mailing Address		
2622 W. MEMORIAL BLVD. LAKELAND FL 33815 US	2622 W. MEMORIAL BLVD. LAKELAND FL 33815 US		
Principal Place of Business	2a. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	•	
22	27		
City & State	City & State	<u> </u>	
23	28		
Zip Country	Zip	Country	
24 25	29	30	
9. Name and Address of Cu	rrent Registered Agent		

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90025 012 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

07/14/1995 4. FEI Number

65-0664101

HILLEY, FRANKLIN STREET SUITE 2100 TAMPA FL 33602 11. Present to the provisions of Sections 697.0502 and 697.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICERS AND DIRECTORS IN 12. TITLE ST DELETE 11 TITLE 12 AMB SIRRET ADDRESS OTY-ST-2P TITLE ST DELETE 21 TITLE 13 TITLE 14 TITLE 14 TITLE 15	DIDLEY FRED O			N	Name				
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Fluittiel Certify that the information	14. I hereby o	certify that the information supplied with this filing does not qualify for t			· - -				

indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same regarded as it made under oath, that fam an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in subject 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.