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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500066939 (6)

S&K COUNTRY CLUB REALTY, INC.

FILED Jun 20 1997 8:00am Secretary of State



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Principal Place of Business Mailing Address							til Batin mileb öttib ti	14 8 6 4 14 1 1 4 4	11 1921
1000 CLINT MOORE RD., STE. 110 BOCA RATON FL 33487 1000 CLINT MOORE RD., STE. 1 BOCA RATON FL 33487-2847									
						3. Date Incorporated or Qualified 08/29/1995	3a, Date of 05/01/1	996	
2. Principal Place of	Business	2a. Mailing A	Address			4. FEI Number	110006		ied For
Suite, Apt. #, etc.	·	26 Suite, Ar	nt # ole			APPLIED FOR 65-0			Applicable
22		27	ot. # ₁ 0t0.			5. Certificate of Status Desired		3.75 Ado Fee Requ	
City & State		City & St	ato		· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution		5.00 Ma	
Zip	Country	Zip		Counti	у	8. This corporation has liability fo			
24	25	29		30		Florida Statutes	☐ Yes ☐ No		
	Name and Address of C		ent			10. Name and Address of New F	egistered Agent	<u>t</u>	
	TION SERVICE COM	PANY		8	Name Jus	DY MATTHEWS- GRAY			
1201 HAY			8:	Street Add	ress (P _A O. Box Number is Not Accepte	ible)			
• IALLAHAS	SSEE FL 32301-2525			8:	3		ND		
•						ITE 110		т	
•				84	City \mathcal{B}_i	OCA RATEN	FL B5	Zip Cod 334	de <i>487</i>
11. Pursuant to the p	provisions of Sections 60	7.0502 and 607.1508, F	lorida Statuto	s, the abo	ve-named corp	poration submits this statement for the	purpose of chan	oing ite r	onistored
agent. I am famij	liar with, and accept the	obligations of Section (nange was a 607.0505, Flo	iutnorizea t orida Statute	es.	tion's board of directors. I hereby acc-	ярстве арродніті	em as reç	gistered
SIGNATURE		Lews Stran	Jui	DY MAT	THEWS. 6	RAY	4/29/97	,	
Signalus	typed or printed name of register OFFICER	S AND DIRECTORS	(NOTE	13.	gent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFF	ICERS AND DIR	ECTORS	IN 12
TITLE PTD			DELE 16	1.1 1111.8		8:000 -06/ ****	G C	hange [Addition
NAME END	elson, Kenneth M			1.2 NAME		©™	药为毛丛节	1,7,B	<u> </u>
	CLINT MOORE RD.,	STE. 110		13 STHE	T ADDRESS	※本来!	773.75	104 ********	000 72 75
	A RATON FL 33487		7 55 57 6	1.4 C(TY-	ST-ZIP				
TITLE DST		ļ	DELFTE	2.1 TITLE			L.J. U	hange [Addition
	ARTZ, LORNA) wycliff country	CLUB RIVD		2.2 NAM8	T ADDRESS				
	E WORTH FL	OLOD BLVD.		2.3 SINC					
TITLE			DELETE	31 THLE			[] C	hange [Addition
NAME			•	3.2 NAME					
STREET ADDRESS				3.3 STRE	T ADDRESS				
CITY-ST-ZIP	_,		T DELETE	3.4. CITY	- ST - ZIP	, , , , , , , , , , , , , , , , , , ,		hanna T	Addition
NAME I		L_	DELETE	4.1 TITLE 4. 2 NAM			ال لي	hange L	Addition
STREET ADDRESS			*	1	T ADDRESS				
CITY - IT-ZIP				4.4 CiTY-	1				
TITLE			DELETE	5 1 TITLE			□ C	hange [Addition
NAME				5.2 NAME					
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP			DELETE	5.4 CITY -			C	hanne T	Addition.
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STREET ADORESS					1 ADDRESS			1	470Ki
CITY OT 710					CT. 710			·)	ol_{α}

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 or on an attachment with an address.

11.00.00