	FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00					FILED		
		F A	LORIDA DEP Sandra	ARTMENT		Feb 23 1998 8:00	am	
ANNUAL REPORT				Secretary of State		Secretary of State		
1. Corporation	e Creek golf and C	000683 DUNTRY CLU	3, INC.)				
17585 SE 102ND AVENUE 17585 SE 102ND AVENU SUMMERFIELD FL 34491 SUMMERFIELD FL 34491						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 08/31/1995		
2. Principal P	ace of Business	2a. Mailin 26	g Address			4. FEt Number Applied F 65-0617453 Not Applie		
Suite, Apt.	#, elc.		Apt. #, etc.			5. Certificate of Status Desired Status Desired Fee Regulated		
City & State	9		State			6. Election Campaign Financing \$5.00 May Bi Trust Fund Contribution Added to Fees		
Zip Country 25		20 Zip 29	Zip Country		intry	Added to Pees Added Added to Pees Added Added to Pees Added Added to Pees Added		
	9. Name and Address of Cu P, HARVEY D		Agent	[30]	81 Name	10. Name and Address of New Registered Agent		
	to the provisions of Sections 607. egistered agent, or both, in the S m familiar with, and accept the o	0502 and 607.150 tale of Florida. Suc bligations of, Sectio	8, Florida Stati h change was on 607.0505, F	utes, the a s authorize Iorida Sta	84 City pove-named cor d by the corpora utes.	poration submits this statement for the purpose of changing its regist tion's board of directors. I hereby accept the appointment as register	ered red	
SIGNATURE	Signature, typed or printed name of registere	d egent and title if applica AND DIRECTORS	ble. (NC	DTE: Registere	d Agent signature requ	ifed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	į	
title Name Street address	P ERP, HARVEY D 2950 SW 53RD ST. OCALA FL 34474		DELETE	1.1 TI 1.2 N 1.3 SI	ME REET ADDRESS			
CITY-ST-ZIP TITLE NAME STREET ADDRESS	VP THOMPSON, JAY A 5365 SW 30TH AVE.		DELETE	2.1 TI 2.2 N		Change Ad	klition	
XITY-ST-ZIP IITLE NAME STREET ADDRESS	OCALA FL 34474 ST ERP, BRENDA J 2950 SW 53RD ST		DELETE	3.1 TI 3.2 N		Change [] Ad	dition	
STY - ST - ZIP ITLE IAME STREET ADORESS	OCALA FL 34474		DELETE	4.1 Tľ 4. 2 N		Change C Ad	dition	
itty-st-21p Itle IAME Treet Address			DELETE	5.1 TF 5.2 N		Change 🔲 Ad	dition	
ITY-ST-ZIP ITLE IAME ITREET ADDRESS			DELETË	6.1 TI 6.2 N/		Change 🛄 Ad	dition	
indicated (officer or c	on this annual report or supplem	ental annual report receiver or trustee	is true and ac empowered to	for the exe	d that my signatu	Section 119.07(3)(i), Florida Statutes. I further certify that the informative shall have the same legal effect as if made under oath; that I am a juired by Chapter 607, Florida Statutes; and that my name appears in	an I	

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