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1997 APR 30 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000004400 (3)

1. Corporation Name

FLORIDIAN YACHT & GOLF CLUB, INC.

Principal Place of Business

200 SOUTH ANDREWS AVENUE 6TH FLOOR
FORT LAUDERDALE FL 33301

Mailing Address

200 SOUTH ANDREWS AVENUE 6TH FLOOR
FORT LAUDERDALE FL 33301-1884

3. Date Incorporated or Qualified

01/12/1996

3a. Date of Last Report

2. Principal Place of Business

21 450 EAST LAS OLAS BLVD

Suite, Apt. #, etc.

22 SUITE 1500

City & State

23 FT. LAUDERDALE FL

Zip

24 33301

Country

25 USA

2a. Mailing Address

26 450 EAST LAS OLAS BLVD

Suite, Apt. #, etc.

27 SUITE 1500

City & State

28 FT. LAUDERDALE FL

Zip

29 33301

Country

30 USA

4. FEI Number

65-0733701

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

9. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.
777 SO. FLAGLER DRIVE STE 500E
WEST PALM BEACH FL 33401

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 607.1508, 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: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME RICHARD C ROCITON
STREET ADDRESS 450 E LAS OLAS BLVD 15 FLOOR
CITY-ST-ZIP FT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME CRIS V BRANDEN
STREET ADDRESS 450 E LAS OLAS BLVD 15 FLOOR
CITY-ST-ZIP FT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME PIERCE WILLIAM
STREET ADDRESS 450 E LAS OLAS BLVD 15 FLOOR
CITY-ST-ZIP FT LAUDERDALE FL 33301

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/97

954-627-5000

CR2E034 (9/96)