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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## P96000013025 (7) **DOCUMENT #**

J. & D. C. CONSULTING, INC.

Principal Place of Business Mailing Address 261 ROYAL OAK WAY 261 ROYAL OAK WAY

## **FILED** Jan 23 1998 8:00am Secretary of State



VENICE GOLF & COUNTRY CLUB VENICE GOLF & COUNTRY CLUB DO NOT WRITE IN THIS SPACE VENICE FL 34292 VENICE FL 34292 3. Date Incorporated or Qualified 02/08/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 65-0643443 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CRAWFORD, JOHN H 261 ROYAL OAK WAY Street Address (P.O. Box Number is Not Acceptable) **VENICE GOLF & COUNTRY CLUB** 83 VENICE FL 34292 City 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. TITLE DELETE 1.1 TITLE Change ■ Addition CRAWFORD, JOHN H NAME 1.2 NAME 261 ROYAL OAK WAY STREET ADDRESS 1.3 STREET ADDRESS VENICE FL 34292 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE CRAWFORD, DIANE S NAME 22 NAME 261 ROYAL OAK WAY 2.3 STREET ADDRESS STREET ADDRESS VENICE FL 34292 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE \_\_\_ Change \_\_\_ Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I 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 13 if changed, or on an attachment with an address.

SIGNATURE: 2

DIANGS CRAWFORD

-15-48

941-493-3292