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FILED

May 23 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000025706 (8)

1. Corporation Name

BUENA VISTA GOLF PROPERTIES, INC.



Principal Place of Business

Mailing Address

101 EAST KENNEDY BLVD., SUITE 3925  
BARNETT PLAZA  
TAMPA FL 33602

101 EAST KENNEDY BLVD., SUITE 3925  
BARNETT PLAZA  
TAMPA FL 33602-5152

3. Date Incorporated or Qualified

03/21/1996

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-3367648

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

FROST, MICHAEL H  
101 EAST KENNEDY BLVD., SUITE 3925  
BARNETT PLAZA  
TAMPA FL 33602

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

D

☐ DELETE

NAME

FROST, MICHAEL H

STREET ADDRESS

101 EAST KENNEDY BLVD., SUITE 3925

CITY-ST-ZIP

TAMPA FL 33602

TITLE

D

☐ DELETE

NAME

KENNEDY, DAVID A

STREET ADDRESS

101 EAST KENNEDY BLVD., SUITE 3925

CITY-ST-ZIP

TAMPA FL 33602

TITLE

D

☐ DELETE

NAME

STOLZ, ROBERT

STREET ADDRESS

1900 BUENA VISTA DRIVE  
LAKE BUENA VISTA FL 32830

CITY-ST-ZIP

TITLE

D

☐ DELETE

NAME

FLUHART, DARRYL

STREET ADDRESS

1900 BUENA VISTA DRIVE  
LAKE BUENA VISTA FL 32830

CITY-ST-ZIP

TITLE

D

☐ DELETE

NAME

BAGWELL, DAVID

STREET ADDRESS

400 AVENUE OF THE CHAMPIONS  
PALM BEACH GARDENS FL 33418

CITY-ST-ZIP

TITLE

D

☐ DELETE

NAME

MOREL, FLORIAN

STREET ADDRESS

1900 BUENA VISTA DRIVE  
LAKE BUENA VISTA FL 32830

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

5/13/97

(813)221-7535

Date

Daytime Phone #

CR2E034 (9/96)