

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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DOCUMENT # **PG6000054423**

1. Entity Name

Florida Golf Properties, Inc.



FILED

03 JUN 24 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

575 E. Chocolate Ave.

3. Mailing Address

575 E. Chocolate Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Hershey, PA

City & State

Hershey, PA

4. FEI Number

65-0677691

Applied For

Not Applicable

Zip

17033

Country

USA

Zip

17033

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

R. Daniel Mays

Street Address (P.O. Box Number is Not Acceptable)

14610 SW 64th Court

City Miami

FL

Zip Code
33158

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

600021110156

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SEE ATTACHED

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

John Caporaletti

John Caporaletti, President

717-520-4200

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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ATTACHMENT

FLORIDA GOLF PROPERTIES, INC.

Directors

Name

Address

Stephen J. Garchik

9001 Congressional Court
Potomac, Maryland 20854

R. Daniel Mays

14610 SW 64th Court
Miami, Florida 33158

Officers

Title

Name

Address

Chairman/Chief
Executive Officer

R. Daniel Mays

14610 SW 64th Court
Miami, Florida 33158

President/Chief
Operating Officer

John Caporaletti

575 East Chocolate Avenue
Hershey, Pennsylvania 17033

Senior Vice President

Stephen J. Garchik

9001 Congressional Court
Potomac, Maryland 20854

Vice President

Michael S. Armel

575 East Chocolate Avenue
Hershey, Pennsylvania 17033

Vice President

Andrew Bonus

575 East Chocolate Avenue
Hershey, Pennsylvania 17033

Treasurer

Stephen J. Garchik

9001 Congressional Court
Potomac, Maryland 20854

Secretary

William F. Leahy

16850 Sudley Road
Centreville, Virginia 20120



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 138461 4311837

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 558.75

ORDER DATE : June 19, 2003

ORDER TIME : 12:35 PM

ORDER NO. : 138461-020

CUSTOMER NO: 4311837

CUSTOMER: Jimmie Garner, Legal Asst
Hale And Dorr
10th Floor
1455 Pennsylvania Avenue, N.w.
Washington, DC 20004

RECEIVED
03 JUN 24 PM 1:07
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: FLORIDA GOLF PROPERTIES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
____ PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - Ext. 1155

EXAMINER'S INITIALS: _____