03-22-1999 90074 015 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074494

LONE PALM GOLF CLUB, INC.

Mailing Address

1936 GEORGE JENKINS RIVID

1936 GEORGE JENKINS BLVD



LAKELAND FL 33815		LAKELAND FL 33815			DO NOT WRITE IN THIS SPA	.CE	
					3. Date Incorporated or Qualifed 09/09/1996		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied Fo	or
21		26			59-3398777	Not Applic	cable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			E Cartificate of Status Desired \$1	8.75 Additional	al
City & State		City & State				5.00 May Be	\neg
23		28	-	- • •		Added to Fees	
Zip	Country	Zip	Country	,	8. This corporation owes the current year Intangib	ole	
24	25	29 3	ō		Personal Property Tax.		
==1	9. Name and Address of Current				10. Name and Address of New Registered Ager	ıt	
		<u>-</u>	81	Name	,	•	
BILLUPS, S K			92	Street	Address (D.O. Poy Number is Not Acceptable)		
	GEORGE JENKINS BLVD.		62	82 Street Address (P.O. Box Number is Not Acceptable)			
LAKE	LAND FL 33815		83	1	-		
	•						
			. 84	City	FI 85	Zip Code	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	t Florida. Such change was auti	norizea by	tne corpo	corporation submits this statement for the purpose of chan pration's board of directors. I hereby accept the appointmen	ging its register nt as registered	red j
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (A)Arr. In	enistered Acc	ot elegature e	equired when reinstating) DATE		_
12.	Signature, typed or printed name of registered agent OFFICERS AND	<u></u>	13.	ni signature n	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN	12
TITLE	D OFFICERS AND	DELETE	1.1 TITLE				ddition
NAME	BARNETT, HOYT R		1.2 NAME		. –	-	
· · · · · · · · · · · · · · · · · · ·	1936 GEORGE JENKINS BLVD.			T ADDRESS			
STREET ADDRESS	LAKELAND FL 33815	1					
CITY-ST-ZIP TITLE	D	□ DELETE	1.4 CITY-S 2.1 TITLE	SI-ZIP	<u> </u>	Change	ddition
	SEBRING, PHILIP T	□ bettie	· 2.2 NAME				
NAME	1936 GEORGE JENKINS BLVD.			T 40000000	<u>,</u>		
STREET ADDRESS	LAKELAND FL 33815			TADORESS	·/		
CITY-ST-ZIP	D	DELETE .	2.4 CITY-1			Change Ac	ddition
TITLE	•	Ciptrese %	3.1 TITLE	~		2.1d.1g0	
NAME	JOHNSON, TINA P		3.2 NAME		· · ·		
STREET ADDRESS	1936 GEORGE JENKINS BLVD.			T ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33815	☐ DELETE	3.4. CITY-1	SI-ZIP	 	Change	ddition
TITLE	,		4.1 HILE		[
NAME	BILLUPS, S K 1936 GEORGE JENKINS BLVD.			TADDRESS			
STREET ADDRESS	LAKELAND FL 33815						
CITY-ST-ZIP	ENCEMBER 1 200 to	☐ DELETE	4.4 CITY-S 5.1 TITLE)1-ZIP	П	Change A	ddition
TITLE		C. DELETE	5.1 TITLE 5.2 NAME		· . ''		
NAME				TADDRESS			
STREET ADDRESS	•		5.4 CITY-5				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	/1^ΔIΓ		Change	ddition
TTLE	_		6.2 NAME		 	avendo □ ∪r	24,400
NAME	,	•	I .	T ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP			6.4 C/TY-5	SI-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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE?