Apr lied For Not Applicable

\$8.75 A Iditional

Fee Required

\$5.00 May Be

Added to Fees

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secre ary of State
DIVISION OF CORPORATIONS

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90187 007 \*\*\*150.00

		DOMEN HOUSE BY DE	
(88)			
	<b>8</b> 1411 <b>38</b> 41) 8844 8814		

DOCUMENT #  1. Corporation Name	P96000084628							
COUNTRY CLUB CAPITAL, INC.								

Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

City & State

26

27

28

3007 MANATEE AVENUE WEST BRADENTON FL 34205

2. Principal Place of Business

Suite, A at. #, etc.

City & State

21

23

3007 MANATEE AVENUE WEST BRADENTON FL 34205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifc ate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

10/14/1996

65-0366226

4. FEI Number

Zíp	Country	Zip	Country		8. This corporation owes the current year	ntangible		
24	25	29	30		Personal Property Tax.	☐ Ye:	s	□No
	9. Name and Add ess of Current I	Registered Agent			10. Name and Address of New Registere	d Agent		
710	AURC DONALD C		81	Name				
TRAVIS, RONALD C			82	Street				
	77 MANATEE AVENUE WEST				Address (P.O. Box Number is Not Acceptable)			
BR.	ADENTON FL 34205		83					
			84	City		les l	Zip C	.do
			84	City	F	85	ZIP U	iue
office o	it to the provisions of Sections 607.0502 a registered agent, or both, in the State of am familiar with, and accept the obligation	Florida, Such change was a	uthorized by	the corp	co poration submits this statement for the purpose poration's board of directors. I hereby accept the appropriate the properties of the pr	of changir printment	ng its r as reg	egistered istered
SIGNATUR	Signature, typed or printed nan e of registered agent a	nd title if applicable (NOTE	Registered Agen	t signature	requi ed when reinstating) DATE			
12.	OFFICERS AND		13.	. J.g. and B	ADDITIC NS/CHANGES TO OFFICERS	ND DIRE	СТОР	RS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE		1	☐ Cha		Addition
NAME	TRAVIS, RONALD C		1.2 NAME		1		-	
STREET ADDRES			1.3 STREET	ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-S					
TITLE	VSD	☐ DELETE	2.1 TITLE			Cha	ange	Addition
NAME	COUPLAND, DAVID R		2.2 NAME			_	-	_
STREET ADDRES			2.3 STREET	ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34205		2.4 CITY-S					
TITLE		☐ DELETE	3.1 TITLE			Cha	ange	Addition
NAME	1		3.2 NAME		1	-	-	-
STREET ADDRESS	2)		3 3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-S					
TITLE	<u> </u>	☐ DELETE	4.1 TITLE	<u></u>		Cha	ange	Addition
NAME			4, 2 NAME				-	_ <del>_</del>
STREET ADDRESS	٤.		4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S1					
TITLE	† <del></del>	☐ DELETE	5.1 TITLE			[] Cha	ange	Addition
NAME			5.2 NAME				•	
STREET ADDRESS	5		53 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST	-ZIP				
TITLE		☐ DELETE	61 TITLE			Cha	ange	Addition
NAME			6.2 NAME				3	
STREET ADDRESS			6.3 STREET	ADDRESS				
CITALLY ADDINESS			E 4 CITY ST					

14. Thereby pertify that the information supplied with this filling 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 path; that I are 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 adaptment with an address, with all other like empowered.

SIGNATURE:

CHARLINE AND TYPED OR PRINTED NAME OF SIGNING CHARLES R DIRECTOR

4/19/99

94178 7777

CKZE034 (11/9