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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000097085 (0)

ZIRKLE AND NOLL GOLF COURSE CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

3543 CORONADO DR., #704 SARASOTA FL 34231

3543 CORONADO DR., #704 SARASOTA FL 34231-7443

FILED Jul 11 1997 8:00am Secretary of State



							3. Date Incorporated or Qualified 11/25/1996	25/1996 FIRST			
2. Principal P				ailing Address				4. FEI Number			Applied For
21 3100	000 C	WINTER GOL	1, RJ 26	SAMC				65-0707587			Not Applicable
Suite, Apt.	#, etc. 2.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	e o e c , /	28					6. Flection Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24 3 4 7	61	Country 25	Zı 29		30	Country	' 		Yes J	21 √0	r s. 199.032,
		and Address of Cu	rrent Register	ed Agent				10. Name and Address of New Re	gistered A	Agent	
NOLL, JEFFERY W						81	Name				
3543 CORONADO DR., #704						82	Street A	Address (P.O. Box Number is Not Acceptable)			
SARASOTA FL 34231						The Street Address (1.0. Dox Addition is Not Acceptable)					
ļ		- - •				83					
						84	City		FL	85 Z	p Code
11, Pursuant	to the provis	ons of Sections 607,	0502 and 607.	1508, Florida Sta Such change wa	tutes, th	e abov	e-named of the corp	corporation submits this statement for the poration's board of directors. I hereby acce	ourpose of	thanging	g its registered
agent. I a SIGNATURE	ım familiar wi	h, and accept the of	bligations of, S	ection 607.0505,	Florida	Statuto	s.		ter one ethic		ar regions
SIGNATURE	Signature, typed	or printed name of registered	d agent and title if ap	opticatile (N	OTE flegi	stered Ape	ent signature i	required when reinstating)	DATE		
12.		OFFICERS	AND DIRECTO	DRS		13.		ADDITIONS/CHANGES TO OFFE	CERS AND	DIRECT	ORS IN 12
TITLE	PT			DELETE		I.1 TITLE	Ī			Chang	e 🔲 Addition
NAME	ZIRKLE, V	/ILLIAM D			1	.2 NAME					
STREET ADDRESS	3543 COF	ONADO DR., #70	4			.3 STREET	ADDRESS				
CITY-ST-ZIP	SARASOT	A FL 34231				4 CITY - S	31 - ZIP				
TITLE	V\$			DELETE		1 TITLE				☐ Chang	e Addition
NAME	NOLL, JEI	FERY W			2	.2 NAME					
STREET ADDRESS		ONADO DR., #70	14		1 2	3 STREET	ADDRESS				
CITY - ST - ZIP		A FL 34231				4 CITY-					
TITLE				DELETE		1 TITLE				Chang	e Addition
NAME				•	- 1	2 NAME	i	-			_
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP	<u> </u>					3 4. CITY-					
TITLE				DELETE		L1 TITLE	U1 411			Chang	e Addition
NAME						I. 2 NAME					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP TITLE	 	······································	· · · · · · · · · · · · · · · · · · ·	DELETE		.4 CITY-5 .1 TITLE	11- ZIP			Chang	e Addition
NAME	<u> </u>			_ occur	1		ŀ				o LJ Addition
						5.2 NAME	4000000				
STREET ADDRESS					1		ADDRESS				
CITY-ST-ZIP				DELETE		4 CITY-S	31 - ZIP	· · · · · · · · · · · · · · · · · · ·		T Ober	. Aaare
TITLE	ĺ			☐ DETERE		S.1 TITLE	ŀ			☐ Chang	e 🔲 Addition
NAME					6	.2 NAME					
STREET ADDRESS					1	3.3 STREET	ADDRESS				
CITY-ST-ZIP	l					5.4 CITY-5	ST - ZIP				

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 eath, 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.

William Bull William D. ZIRKLE

407-521-9986 30 JUNE 1997