

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS



FILED
Jul 12, 1999 8:00 am
Secretary of State
07-12-1999 90010 046 ***550.00

DOCUMENT # P97000009618
Corporation Name
COUNTRY CLUB HOMES AT AUDUBON, INC.



Principal Place of Business
315 BURNABY DRIVE
NAPLES FL 34110

Mailing Address
15315 BURNABY DRIVE
NAPLES FL 34110

DO NOT WRITE IN THIS SPACE

Principal Place of Business
26
Suite, Apt. #, etc.
27
City & State
28
Zip
25
Country

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country

3. Date Incorporated or Qualified
01/30/1997

4. FEI Number
59-3424340
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
CROMWELL, WALTER B
15315 BURNABY DRIVE
NAPLES FL 34110

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

I, 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

OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	DELET	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS
TITLE	NAME	DELET	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS
TITLE	NAME	DELET	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS
TITLE	NAME	DELET	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS
TITLE	NAME	DELET	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS
TITLE	NAME	DELET	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS
TITLE	NAME	DELET	7.1 TITLE	7.2 NAME	7.3 STREET ADDRESS
TITLE	NAME	DELET	8.1 TITLE	8.2 NAME	8.3 STREET ADDRESS
TITLE	NAME	DELET	9.1 TITLE	9.2 NAME	9.3 STREET ADDRESS
TITLE	NAME	DELET	10.1 TITLE	10.2 NAME	10.3 STREET ADDRESS
TITLE	NAME	DELET	11.1 TITLE	11.2 NAME	11.3 STREET ADDRESS
TITLE	NAME	DELET	12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS

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.

SIGNATURE: [Signature] 7/6/99 941-775-8703

CR2E034 (5/99)