ECOND 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**

OCUMENT # P97000023307

MEADOWOOD GOLF AND TENNIS CLUB F & B, INC.

FILED Jul 12, 1999 8:00 am Secretary of State

07-12-1999 90009 022 ***558.75



incipal Place of Business Mailing Address						16 1001 (EB)
1 INTERNATIONAL DRIVE 5211 INTERNATIONAL ANDO FL 32819 ORLANDO FL 32819		5211 INTERNATIONAL DRI ORLANDO FL 32819	IVE		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					03/14/1997	
Principal Place of Business 2a. Mailing Address						ied For
тиюрат	add of Eddiness	26	naming Accorded			Applicable
V		Suite, Apt. #, etc.	, Apt. #, etc.		\$8.75 Ad	
		27	27		5. Certificate of Status Desired Fee Requ	uired
		City & State	& State		6. Election Campaign Financing \$5.00 M	ay Be
		28			Trust Fund Contribution Added to Fees	
Zip	ip Country Zip		Country		8. This corporation owes the current year	
	25	29	30		Intangible Personal Property. Yes !!	40
····	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Registered Agent	
CAR	RINGTON, CHARLES C ESQ.			81 Name		1
215 N. EOLA DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32801				83		
				63		
				84 City	FL 85 Zip Co	de
office or	to the provisions of sections 607.0502 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was	authorize	d by the corpora	poration submits this statement for the purpose of changing its registion's board of directors. I hereby accept the appointment as regis	stered stered
GNATURE	, ,					
	Signature, typed or printed name of registered ager		-	ered Agent signature re	equired when reinstating) DATE	
		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
.E	D DELETE		1.1 TI		Change L	Addition
Æ	ESTEIN, LOTHAR		1.2 N/			}
EET ADDRESS 5211 INTERNATIONAL DRIVE			1.3 STREET ADDRESS			
Y-ST-ZIP	ORLANDO FL 32819			TY-ST-ZIP		77.15
.E 	L DELETE		2.1 TI		Change	Addition
Æ			2.2 N/			
EET ADDRESS				REET ADDRESS		
/-ST-ZIP .E		DELETE	3.1 TI	TY-ST-ZIP	Change	Addition
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r-st-zip				TY-ST-ZIP		
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.E		DELETE	5.1 TI	TLE	Change	Addition
ΜE			5.2 N	AME .		
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.E		DELETE	6.1 TI	TLE	Change	Addition
AE.			6.2 N/	WE		
EETADDRESS			6.3 ST	REET ADDRESS		
CT ZID			6.0	TV CT 710		1

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.

IGNATURE:

| SIGNATURE | AND EXECUTE OF DEPARTS NAME OF SIGNATURE OF DEPARTS NAME OF SIGNATURE | Departs Name of Signature | Departs Name of Signature | Departs | Departs