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

**PROFIT CORPORATION** ANNUAL REPORT

**19**98

CITY-ST-ZIP



ELORIDA DEPARTMENT DE STATE

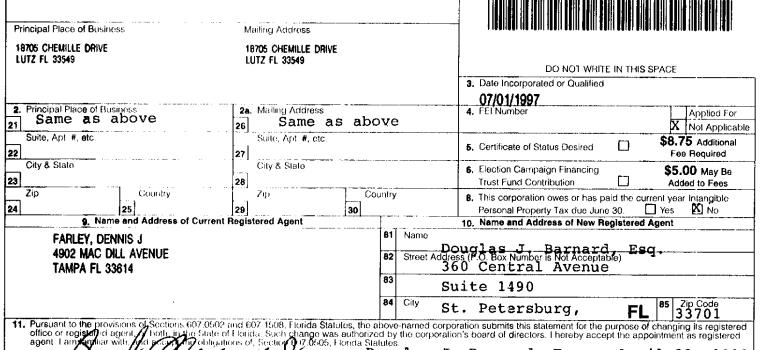
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700058024 (5)

CHEVAL POLO, GOLF AND COUNTRY CLUB, INC.

## **FILED** May 28 1998 8:00am Secretary of State



Douglas J. Barnard, Esq. April 28, 1998 SIGNATURE gisteroit Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELE TE TITLE 1.1 11111 ☐ Change Addition President NAME 1.2 NAME Patricia Dickerson STREET ADDRESS 1.3 STREET ADDRESS 18705 Chemille Drive Lutz,F1 CITY-ST-ZIP 1.4 CiTY - ST - ZiP DELFTE TITLE 2.1 HILE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3 1 1ITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST - 7IP DELETE TITLE Addition 4.1 THE Change NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE TITLE 5.1 TITLE Change Addition NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-ST-ZIP TITLE DELETE 300002543963 Change 61 TITLE Addition NAME 6.2 NAME -0**6**/02/98---01031---0**2**1 STREET ADDRESS 6.3 STREET ADDRESS \*\*\*300.00

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 supplience 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 this receiver or trustee improve of to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changes

6.4 CITY - ST - ZIP

Patricia M. Dickerson

April 28, 1998 (813) 959-9554