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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

P97000060696 (6)

PALM BEACH GOLF CENTER - NORTH PALM BEACH, INC.

## FILED Jan 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 7100 NORTH MILITARY TRAIL 7100 NORTH MILITARY TRAIL PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/11/1997 2. Principal Place of Business 2s, Mailing Address Applied For **FEI Number** 65-0771734 Not Applicable 21 Sulte, Apt. #, otc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes □ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SINGER, MICHAEL S 701 NORTHPOINT PARKWAY STE. 330 Street Address (P.O. Box Number is Not Acceptable) **WEST PALM BEACH FL 33407** 83 84 City Zip Code 11. 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 (NOTE Flogistered Agent signature required when rainstating) Signature, typod or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DILLITE Addition Change THLE SUGARMAN, LAWRENCE NAME 1.2 NAME 7100 NORTH MILITARY TRAIL STREET ADDRESS 1.3 STREET ADDIRESS PALM BEACH GARDENS FL 33410 CITY-ST-ZIP 1.4 CHY-S1-ZIP DELETE Change Addition TITLE 2111111 NAME 2.2 NAME 2.3 STREET ADDRESS 2. 4 City - \$1 - 7(F CITY-ST-20 DELETE \_\_\_ Addition Change TITLE 3.1 THE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. C(TY-S1-Z)P DELETE ☐ Change ■ Addition 4.1 TITLE THUE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - 2IP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 BITLE 5.2 NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP DELFTE Charige Addition G1 HITEF TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 City - St - ZiP

14. Thereby 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 of 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

1-9-98 (EL)842-7100