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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

### DOCUMENT # P98000020762 1. Corpóration Name

LAKÉ JOVITA GOLF ASSOCIATES, INC.

# **FILED** Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90090 043 \*\*\*150.00



	THE GOLF AGGOGIATES,										
Principal Place	of Business	Ma	ailing Address					. Limmilmus sem smelle suters miters anders and	II <b>39</b> 11 <b>8</b> 1	1811 BEHN 1884B	<b>41119 1191 1891</b>
14651 21 STREET 14651 21 STREET											
DADE CITY FL 33523 DADE CITY FL 33523									. =	00405	
								DO NOT WRITE IN	IHIS	SPACE	
								3. Date Incorporated or Qualifed			}
		-1-	\$4-9:- Address					03/04/1998 4. FEI Number		ΙΔn	plied For
2. Principal Place of Business 2a, Mailing Address								59-3514101		<del></del>	t Applicable
25     26					<del></del>					\$8.75	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22			dults, Apr. #, etc.	** ±				- 5. Certifcate of Status Desired		Fee Re	
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be	
23			28					Trust Fund Contribution		Added t	
Zip Country			Zip Country				8. This corporation owes the current y	ear Inta	angible		
24	25	29		30				Personal Property Tax.		Yes	No
	9. Name and Address of Curren		tered Agent	1,5.5.4				10. Name and Address of New Regis	tered	Agent	
[					81	Name					•
BROWN, BILLY E					82	Street	∆ddrei	ss (P.O. Box Number is Not Acceptable)			
14651 21 STREET					52 Street Addit			as (1.0. box Hambor is Hot / loospillor)			
DADE CITY FL-33523					83						
,				•				··		85 Zip (	Code
	Support Contract Contract				84	City			FL	.	1
office or re agent. I ar	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	ta. Such change was a	alithorizec	יטחו	the corno	corpor	ration submits this statement for the purp o's board of directors. I hereby accept the	ose of appoir	changing its ntment as re	registered gistered	
SIGNATURE	Signature, typed or printed name of registered age	it and title	If applicable. (NOT	E: Registered	Agen	t signature n	equired v	when reinstating)	ATE		
12.	OFFICERS AN			13.				ADDITIONS/CHANGES TO OFFICE	RS AN	D DIRECTO	RS IN 12
TITLE	D . 3		☐ DELETE	1.1 TI	TLE			<del></del>		Change	☐ Addition
NAME	BUCKINGHAM, RICHARD			1.2 N/	ME						
STREET ADDRESS	14651 21 STREET			1.3 ST	REET	ADDRESS					}
CITY-ST-ZIP	DADE CITY FL 33523			1.4 CI	TY-S1	r-zip					
TITLE	D		☐ DELETE	2.1 TI	TLE			<del></del> -		Change	☐ Addition
NAME .	HINES, JAMES			2.2 N	AME						
STREET ADDRESS	14651 21 STREET			2.3 \$	TREET	ADORESS					Ì
CITY-ST-ZIP	DADE CITY FL 33523			2.40	πy-s	T-ZIP.					
TITLE	D		☐ DELETE	3.1 TI	TLE			:		☐ Change	Addition
NAME	HUNNICUTT, JACK			3.2 N	AME						
STREET ADDRESS	14651 21 STREET			3.3 S	REET	FADDRESS					}
CITY-ST-ZIP	DADE CITY FL 33523			3.4. C	лү-s	T-ZIP					
TITLE	D		☐ DELETE	4.1 TI	TLE					Change	Addition
NAME	MCBRIDE, CHARLES			4. 2 N	AME						
STREET ADDRESS	14651 21 STREET			4.3 S	REET	ADDRESS					
CITY-ST-ZIP	DADE CITY FL 33523			4.4 C	TY-SI	T-ZIP					
TITLE	D		☐ DELETE	5.1 ΤΙ				•		☐ Change	☐ Addition
NAME	MCGEEHAN, HUGH			5.2 N	AME			r r			
STREET ADDRESS	14651 21 STREET			5.3 \$	TREET	I ADDRESS					
CITY-ST-ZIP	DADE CITY FL 33523			5.4 C		T-ZIP					
TITLE	D		☐ DELETE	6.1 ∏	TLE					Change	Addition
NAME	OVERSTREET, C.M.			6.2 N	AME						
STREET ADDRESS	14651 21 STREET			6.3 \$	TREET	ADDRESS	}				
CITY-ST-ZIP) .f	DADE CITY FL 33523			6.4 C	TY-S	T-ZIP				_	

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 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, with all other like empowered.

**SIGNATURE:** 

(352) 567-5133

Daytime Phone #

# ATTACHMENT TO 1999 CORPORATION ANNUAL REPORT

RE: Lake Jovita Golf Associates, Inc. FEI No. 59-3514101
Document No. P98000020762

12. Officers and Directors (Continued)

D Alma C. Paul 9841 Lakeview Drive New Port Richey, FL 34654

D Bennie M. Rivenbark 16463 Brittle Road Brooksville, FL 34605

D Robert W. Strickland 10175 South Plymouth Terrace Homosassa, FL 34448

Exec. V/P Billy E. Brown 14651 21st Street Dade City, FL 33523