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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

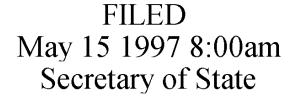
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S04057

(3)

BARRINGTON CLUB, INC.

SIGNATURE:





Daytime Phone N

Principal Place 5551 RIDGEWO 203 NAPLES FL 339 US	OD DR	Mailing Address 5551 RIDGEWOOD DR 203 NAPLES FL 34108-2733 US			Data lacoros	ated or Qualified	3a Date of	ast Do	nor!	
				10/03/1990				POIL		
2. Principal P 21	iace of Business	2a. Mailing Address				4. FEI Number Applied For 65-0241109 Not Applicate				
Suite, Apt #, etc.		Suite, Apt #, etc.				Certificate of Status Desired Section				
City & State	e	City & State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
-Σφ	Country	Zip	Cou	ntry	8. This corporation	on has liability for i		nder s.		
24	25 9. Name and Address of Curre		0		Florida Statute	s Idress of New Re				
5551 SUIT NAP	'Kie, Pamela S. I ridgewood dr. 'E 201 Les Fl 33963		-	84 GIVIAT	HELEN A LESS (P.O. Box Number TE 501	THAN er is Not Acceptab LUCOAS IS	SIVE FL 85	Z-223	lode Z	
CICNIATOR	to the provisions of Sections 607.05 egistered agent or both, in the Stal in familiar with accept the oblined acceptance to the oblined acceptance of acce	/ 1 L 1 T TAN		ove-named corp by the corporal ates.		statement for the pors. I hereby accep	urpose of chai of the appointm DATE	nging its nent as r	registered egistered	
12.		ND DIRECTORS	13.		ADDITIONS/CH	IANGES TO OFFIC				
NAME STREET ADDRESS CITY-ST-71P	DV Griffin, Gerald F. II 5551 Ridgewood DR Naples Fl	[] DELETE		ł			□ (Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CORACE, RICHARD F. 5551 RIDGEWOOD DR NAPLES FL	DELETE	2.1 TIT 2.2 NA 2.3 ST	LE				Change	Addition	
TITLE NAME STREET ADDRESS	VTD SHARPE, KEITH A. 5551 RIDGEWOOD DR NAPLES FL	DELETE	31 TIT 32 NA 33 ST	LE Me Réey address				Change	Addition	
DILLE NAME STREET ADDRESS	S YOUNG, CAROL, ANNE 5551 RIDGEWOOD DR NAPLES FL	☐ DELETE	4.1 TH 4. 2 N 4.3 ST	AME REET ADDRESS				Change	Addition	
CITY: ST-ZIP TIFLE NAME SIRETT ADDRESS	THE BLOTE	DELETE	5.1 TI 5.2 NA 5.3 ST	ME REET ADDRESS				Change	Addition	
CITY-ST-2IF THEE NAME STREET ACCRESS		☐ DELETE	6.1 Ti 6.2 N/ 6.3 ST	ME REET ADDRESS				Change	Addition	
14. I do herel informatio Lam an o appears	L by certify that the information surpli on indicated on this annual report of officer or director of the corporation in Block 12 or Block 13 if changes	ice with the thing does not qualify study mental arinual report is the processor or trusted empower for process trackment with an addr	for the	exemption stated accurate and that execute this repo	d in Section 119.07(3 Lany eignature shall h rt as required by Cha	(i), Florida Statute ave the same lega pter 607, Florida S	s. I further cert il effect as if m statutes; and th	ify that t ade und at my n	he ler oath; that ame	