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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

5600 ELKCAM BLVD BEVERLY HILLS FL 33462



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S10234

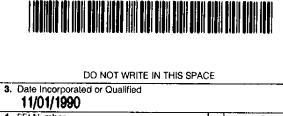
(0)

Mailing Address
ONE VIRGINIA AVE

INDIANAPOLIS IN 46204

PINE RIDGE GOLF MANAGEMENT, INC.

FILED Mar 18 1998 8:00am Secretary of State



					11/01/1990		
2. Principal Place of Business		2a, Mailing Address		4. FEI Number	Applied For		
21		26		59-305590 3	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		E Outilities (Out David	\$8.75 Additional		
22				Certificate of Status Desired	5. Certificate of Status Desired Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Ζιρ	Cour	ntry	8. This corporation owes or has paid the o	current year Intangible	
24	26	29	30			¥2 Yes □ No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registers	d Agent	
FRIEDMAN, SHELDON				81 Name	e		
22467 ARCADIA CT BOCA RATON FL 33433			-	82 Street Address (P.O. Box Number is Not Acceptable)			
				of the contract of the contrac			
			Ţ	83			
			L				
	•		[]	B4 City	F	85 Zip Code	
11, Pursuant	to the provisions of Sections 607.05t	02 and 607,1508. Florida Stati	ites the ab	ove-named	od corporation submits this statement for the automate	of all and in the contract of	
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized	by the cor	proporation's board of directors. I hereby accept the appropriation of the purpose	ppointment as registered	
	п таншаг мин, апо ассерстве обяд	gations of, Section 607.0505, F	iorida Statu	ites.			
SIGNATURE	Signature, typed or printed name of registered ag	and and tills it analized to	TC: Decisioned	American s	re required when reinstating) DATE		
12.		ID DIRECTORS	13.	Agoni signalui	ADDITIONS/CHANGES TO OFFICERS AT	ID DIDECTORS IN 12	
TITLE	PD	DELETE	1.1 TITL	F	ADDITIONS/CHANGES TO OFFICERS AT	Change Addition	
NAME	FRIEDMAN, SHELDON		1.2 NAM			C Change C Addition	
STREET ADDRESS	22467 ARCADIA CT						
CITY-ST-ZIP	BOCA RATON FL 33433			EET ADDRESS			
TITLE	VD	DELETE		/-ST-ZiP		The Control of the Control	
	SCHWARTZ, JOSEPH	L Decerte	2.1 TITL			☐ Change ☐ Addition	
NAME	1620 LANDS END RD.		2.2 NAN				
STREET ADDRESS	MANALAPAN FL		2.3 STR	EET ADDRESS			
CITY-ST-ZIP	SO SO	D or ere		Y-ST-ZIP			
TITLE	EPPERLY, HARRISON	☐ DELETE	3.1 TITL	E		Change Addition	
NAME			3.2 NAN	Œ			
STREET ADDRESS	ONE VIRGININIA AVE #220		3 3 STA	eft address	i <mark>-</mark>		
CITY-ST-ZIP	INDIANAPOLIS IN 46204		3.4. CIT	Y-ST-ZIP			
TITLE		DELETE	4.1 TITL	É		Change Addition	
NAME			4. 2 NAI	ΛE			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP			4,4 CITY	- ST- ZIP			
TITLE		☐ DELETE	5.1 TITU	E		Change Addition	
NAME			5.2 NAM	IÉ		اکیم	
STREET ADDRESS			5.3 STRI	ET ADDRESS		UW	
CITY-ST-ZIP				-ST-ZIP		318	
TITLE		DELETE	6.1 TITLE			- Change Addition	
NAME		<u> </u>	6.2 NAM		2000024602 -03/18/98010030		
STREET ADDRESS				_	-03/18/98010030	/32	
STREET RUPRESS			6.3 STRE	ET 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 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 address.

CONSTRUCT. R. Oruce

3-10-98 5614170231