

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Mayhew Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S11889 (0) 1. Corporation Name ORLANDO GOLF #2, INC.			
Principal Place of Business 8829 LADRIDO LN ORLANDO FL 32837 US		Mailing Address 8829 LADRIDO LN ORLANDO FL 32837 US	
2. Principal Place of Business 21 State Apt. # etc. 22 City & State 23 City 24 State		2a. Mailing Address 26 State Apt. # etc. 27 City & State 28 City 29 State 30	
3. Date incorporated or qualified 11/08/1990		3a. Date of Last Report 06/20/1994	
4. FEI Number 59-3039827		Applied For ☐ Not Applicable	
5. Certificate of Status (desired) ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent LINDBERG, TERRY 8829 LADRIDO LANE ORLANDO FL 32837		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
11. Pursuant to the provisions of Sections 607.01(2)(c) and 607.14(2)(b), 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. Thereby accept the appointment as registered agent. I am bound with and accept the obligations of the said Statute, Florida Statutes.			
SIGNATURE Signature of Agent (Print Name and Address of Agent) Signature of Registered Agent (Print Name and Address of Agent)			
12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
12a. NAME 12b. STREET ADDRESS 12c. CITY 12d. STATE 12e. ZIP	P LINDBERG, TERRY 8829 LADRIDO LN. ORLANDO FL	13a. NAME 13b. STREET ADDRESS 13c. CITY 13d. STATE 13e. ZIP	☐ Change ☐ Addition
12a. NAME 12b. STREET ADDRESS 12c. CITY 12d. STATE 12e. ZIP	V LINDBERG, PAM 8829 LADRIDO LN ORLANDO FL	13a. NAME 13b. STREET ADDRESS 13c. CITY 13d. STATE 13e. ZIP	☐ Change ☐ Addition
12a. NAME 12b. STREET ADDRESS 12c. CITY 12d. STATE 12e. ZIP		13a. NAME 13b. STREET ADDRESS 13c. CITY 13d. STATE 13e. ZIP	☐ Change ☐ Addition
12a. NAME 12b. STREET ADDRESS 12c. CITY 12d. STATE 12e. ZIP		13a. NAME 13b. STREET ADDRESS 13c. CITY 13d. STATE 13e. ZIP	☐ Change ☐ Addition
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14. I hereby certify that the information supplied with this filing is voluntarily furnished and that I am qualified to be the registered agent for the corporation stated in Section 119.01(2)(b), 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 a duly elected or chosen officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this annual report or on a supplemental report with an address.			
SIGNATURE: <i>Terry Lindberg</i> <i>Pam Lindberg</i> 4/25/95 876-1069 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR			