

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 FEB 28 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S27084 (0)

1. Corporation Name

SILVER OAKS GOLF AND COUNTRY CLUB, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 01/24/1991	3a. Date of Last Report 02/18/1994
4. FEI Number 59-3045694	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	

2. Principal Place of Business	2a. Mailing Address
C/O JOHN C BIERLEY, ESO 111 E MADISON ST., STE 2400 POB 1531 TAMPA FL 33601	C/O JOHN C BIERLEY, ESO 111 E MADISON ST., STE 2400 POB 1531 TAMPA FL 33601
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BIERLEY, JOHN C 111 E MADISON ST., STE 2400 P.O. BOX 1531 TAMPA FL 33601	81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code FL

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

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	DOI, KUNIO	1.2 NAME	
STREET ADDRESS	2-17-21 MUGINO HAKATA KU	1.3 STREET ADDRESS	
CITY - ST - ZIP	FUKUOKA-SHI, JAPAN	1.4 CITY - ST - ZIP	
TITLE	VPD	2.1 TITLE	☒ Change ☐ Addition
NAME	FUMINO, DOI	2.2 NAME	
STREET ADDRESS	3684 CLUBHOUSE DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	ZEPHYRHILLS FL	2.4 CITY - ST - ZIP	
TITLE	S	3.1 TITLE	☐ Change ☐ Addition
NAME	BIERLEY, JOHN C.	3.2 NAME	
STREET ADDRESS	111 E MADISON ST. #2400	3.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☒ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included 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.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

2/22/95 (813)788-1225

(Date)

(Telephone #)