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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # \$68069

1. Corporation Name

Principal Place of Business

TOURNAMENT PLAYERS CLUB AT HERON BAY, INC.

| CORAL SPRINGS FL 33076 | | | | PONTE VEDRA FL 32082 | | | | | | | | | | | | | |
|---|-------------------|-------------------------|------------------------------|--|-------------------------|-------------|------------|---|---------------|------------------------|--------------|----------|-------------|---------------|----------------|------------|------------|
| US | | | US | US | | | | DO NOT WRITE IN THIS SPACE | | | | | | | | | |
| | | | | | | | ; | 3. Date Incorporated or Qualifed | | | | | | | | | |
| L | | | | | | | | | | | 7/18/199 | 11 | | | | | |
| 2. Principal Place of Business . | | | | 2a. | 2a. Mailing Address | | | ' | 4. FEI Number | | | \vdash | Applied For | | | | |
| 21 | | | | 26 | | | | | _ 5 | 5 9-31435 3 | 32 | | | | | Applicable | |
| Suite, Apt. #, etc. | | | | | Suite, Apt. #, etc. | | |] , | 5. 0 | Certifcate of | Status D | esired | ¥ | 7 | D Ad Regu | ditional | |
| 22 | | | 27 | 1. | | | | | | | | | | | | | |
| City & State | | | | City & State | | | - 1 | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees | | | | | • | | | | |
| 23 | | | 28 | | | | -+ | | | | | | | 30 10 | rees | | |
| Zip Country | | | | Zip Country . | | | 1 | 8. This corporation owes the current year Intangible Personal Property Tax. | | | | | | | | | |
| 24 25 9. Name and Address of Current | | | 29 | | | | | 10. Name and Address of New Registered Agent | | | | | | 3110 | | | |
| ŀ | 10.77.4.77 | 9. Name and | Address of Curi | rent kegis | tered Agent | | 81 | Name | | 10. 1 | tallio allo | | VI 11011 | i togrotor ou | | | |
| l | TRIO | LA. JAMES C | | | | - E | | | | | | | | | | | |
| 112 PGA TOUR BLVD | | | | | 82 Street Addr | | | ddress (P.O. Box Number is Not Acceptable) | | | | | | | | | |
| l | | TE VEDRA FL | | • | 83 | | | | | | | | | | | | |
| l | 1011 | IL VEDINALE | OLUUL | | | ľ | 03 | | | | | | | | | | _ |
| l | | | | | | 1 | 84 | City | | | | _ | | FL | 85 Z | ip Co | de |
| ŀ | | | -4.0 | E00 6 | 07 4E00 Florido Statuto | a tha ab | | named a | ornorati | tion : | eubmite thie | statemer | at for the | | f changing | its re | egistered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t office or registered agent, or both, in the State of Florida. Such change was authoragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida | | | | | thorized i | hv i | the corboi | ration's | boa | ard of directo | rs. I here | by acce | pt the appo | intment as | regi | stered | |
| l | agent. I ar | n familiar with, a | and accept the obli | igations of, | Section 607.0505, Flori | da Statut | es. | | | | | | | | | | |
| ļ | SIGNATURE | | | | Z-referring AIOTE | Dometered A | | t signature red | outend who | en ceir | netation\ | | | DATE | | | |
| Į | 12. | Signature, typed or pri | of registered of of officers | | | 13. | gen | t signature re- | QUII 60 WINC | | DDITIONS/C | HANGE | S TO OF | | ND DIREC | TOR | S IN 12 |
| ŀ | TITLE | DSRV | OTTIOE NO. | 7410 DITE | DELETE | 1.1 TITL | E | | | | | | | | K) Chan | | ☐ Addition |
| ĺ | NAME | ZINK, CHARL | ESI - | | | 1.2 NAME | | | | | | | | | | | |
| l | STREET ADDRESS | 20 POINCIAN | | | | | | ADORESS | 104 | Ρ1 | anters | Row | East | : | | | |
| l | CITY-ST-ZIP | | RA BCH FL 3208 | 32 | | 1.4 CITY | /- ST | 1 | | | | | | | | | |
| ŀ | TITLE | DP | V DOTT L OLD | <i></i> | ☐ DELETE | 2.1 TITL | _ | | | | | _ | | | Chan | ge | ☐ Addition |
| l | NAME | KELLY, VERN | JON A JR | | | 2.2 NAM | Æ | | | | | | | | | | |
| l | STREET ADDRESS | 1221 S FIRS | | | | | _ | ADORESS | | | | | | | | | |
| ١ | . 1 | | LE BCH FL 322 | ፍሰ | | 2.4 CIT | | ĺ | | | | | | | | | |
| ŀ | CITY-ST-ZIP TITLE | D - | | | ☐ DELETE | 3.1 TITL | _ | 2. | | | | | | | Chan | ge | Addition |
| Į | NAME | FINCHEM, TI | MOTHY W | | | 3.2 NAN | | . [| | | | | | _ | , - | - | |
| İ | STREET ADDRESS | 7160 MARSH | | | | | | ADDRESS | | | | | | | | | |
| ١ | CITY-ST-ZIP | | RA BCH FL 320 | 82 | | 3.4. CIT | | | | | | | | | | | |
| ŀ | TITLE | VS | J. JOH . L 020 | | ☐ DELETE | 4.1 TITL | _ | - | | | | | | | Chan | ge | Addition |
| I | NAME | TRIOLA, JAM | IES C | | | 4, 2 NA | ME | | | | | | | | | | |
| ١ | STREET ADORESS | 1165 SALT N | | | | | | ADDRESS | | | | | | | | | |
| l | CITY-ST-ZIP | | RA BCH FL 3208 | 82 | | 4.4 CITY | | | | | | | | | | | |
| ł | TITLE | V | | | ☐ DELETE | 5.1 TITL | _ | | | | | _ | | | Chan | ge | ☐ Addition |
| Į | NAME | TOMLINSON, | . KEITH W. | | | 5.2 NAM | ИE | | | | | | | | | | |
| ١ | STREET ADDRESS | 315 PABLO I | | | | 5.3 STR | REET | ADDRESS | | | | | | | | | |
| ١ | CITY-ST-ZIP | | RA BEACH FL 3 | 2082 | | 5.4 CITY | Y-ST | r-zip | | | | | | | | | |
| ŀ | TITLE | SRV | | | ☐ DELETE | 6.1 TITL | .E | | | | | | | | Chan | ge | ☐ Addition |
| l | NAME | | E. EDWARD L | | | 6.2 NAM | ΛE | | | | | • | | | | | |
| i | STREET ADDRESS | | ER LAKE LANE | FAST | | 6.3 STR | REET | ADDRESS | | | | Cont | inue | d | | | |
| | CITY-ST-ZIP | | DRA BEACH FL | | | 6.4 CITY | Y-ST | r-ZIP | | | | | | | | | |
| ı | GHT-SI-ZIP | I CHAIL ACIAL | AR DESCRIPTE | CEUVE | | _ | | | | | | | | | | | |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/99

904/285-3700

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90156 047 ***158.75

Item 12. Officers and Directors (continued)

TOURNAMENT PLAYERS CLUB AT HERON BAY, INC.

| Title | Name | Address | City, State and Zip |
|-------|-------------------|---------------------------|--------------------------------|
| V | Hawes, Timothy M. | 8157 Seven Mile Drive | Ponte Vedra Beach, FL 32082 |
| V | Davison, Peter S. | 24621 Deer Trace Drive | Ponte Vedra Beach, FL 32082 |
| V/T | Winsor, Steven A | 1217 SaltCreek Pointe Way | Ponte Vedra Beach, FL 32082 |