

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S85174

1. Entity Name

LEMON BAY GOLF CLUB, INC.

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90010 041 ***150.00

Principal Place of Business 9600 EAGLE PRESERVE DRIVE ENGLEWOOD FL 34224	Mailing Address 9600 EAGLE PRESERVE DRIVE ENGLEWOOD FL 34224-9172
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country

4. FEI Number, **36-3643444** | Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ITTERSAGEN, SCOTT D.
1861 PLACIDA ROAD
SUITE 104
ENGLEWOOD FL 34223

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HONEY, J KIMPTON 9600 EAGLE PRESERVE DR ENGLEWOOD FL 34224	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP John Hillenbrand, John ← Same
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-P WILLIAMS, LAWRENCE 9600 EAGLE PRESERVE DR. ENGLEWOOD FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Meyer, Barbie ← Same
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COALE, EDWARD H 9600 EAGLE RESERVE DR ENGLEWOOD FL 34224	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-Haas, James ← Same
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, JAMES 9600 EAGLE PRESERVE DR ENGLEWOOD FL 34224	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Glewin, James ← Same
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CLAUDE, CINDY 9600 EAGLE PRESERVE DR ENGLEWOOD FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Guyer, Ryan ← Same
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TYLER, MARGARET 9600 EAGLE PRESERVE DR ENGLEWOOD FL 34224	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ashworth, John

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Umaj Chud 1-21-00 941.697.4190
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #