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

**PROFIT CORPORATION** · ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # V27410

COURTYARDS AT SUN CITY CENTER, INC.					
Principal Place	e of Business	Mailing Address		E 1884 Birdia sibir (8214 Birdia 41811 Biri Atla	010/1 0140/1 0/010 0100/1 0/0/1 100/
2020 CLUBHOW		5050 CTABHQQSE DA.			
P O BOX 5698		P O BQX/5698			
SUN CITY CENT	PÉR FL 33573	SUN CITY CENTER FL 33573		DO NOT WRITE IN THIS	S SPACE
us · /				3. Date Incorporated or Qualifed 04/09/1992	
2. Principal Pl	ace of Business	2a. Mailing Address	_	4. FEI Number	Applied For
21 137 5.	Pebble Brach Blvd.	26 137 5. Peb	ble BeachBh	√d. 59-3130310	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.  27 Suite /0/		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 500	. City Center, FL	28 Sun City Cer		Trust Fund Contribution	Added to Fees
Zip	Country	Zip 22 C02 -	Country	8. This corporation owes the current year In	
24 333	573 [25] USA	29 33573 30	usa	Personal Property Tax.	Yes No
	9, Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
ELIMIN AND TOM & KI				Richard Hutchinson	
2020 CLUBHOUSE DR			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUN CITY CENTER FL 33573			83	7 S. Pebble Beach Blud	
	,		<u> </u>	uite 201	
•			84 City 50	un City Center Fl	85 Zip Code 33573
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					
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 true if applicable. (NOVE: Re	WARD HV7CH egistered Agent signature requi	ired when reinstating)	191
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	HOFFMAN, ALFRED, JR.		1.2 NAME	137 S. Pebble Beach Blud . Sui	k 101
STREET ADDRESS	1602 W. TIMBERLANE DR.		1.3 STREET ADDRESS	5 - Col Contro B 3250	7 7 7
CITY-ST-ZIP	PLANT CITY FL		1.4 CITY-ST-ZIP	Sin City Center, Fc. 3351	Change Addition
TITLE	D ACKEDIAN DONE	☐ DELETE	2.1 31162		E change
NAME	ACKERMAN, DON E.		2.2 NAME	137 S. Pebble Beach Blood. Sui	K 101
STREET ADDRESS	1602 W. TIMBERLANE DR.			Sun City Center, FL. 33573	
CfTY-ST-ZIP	PLANT CITY FL	[ TOELETE	2.4 CITY-\$T-ZIP 3.1 TITLE	PCFO	☐ Change ☐ Addition
TITLE	D DETER ELECTIC	Location	3.7 11102	r. II Sentt	_ , _
NAME	Peter, E. Leslie 1602 W. Timberlane Dr.		3.2 NAME		14 101
STREET ADDRESS	IDUZ VI. IUKUENLANE UN.			127 5 POBBLE BEACH BURG. 24	2FC / 5/
CITY-ST-ZIP			3.3 STREET ADDRESS	137 5 Pebble Black Burg. 20	12/01
	PLANT CITY FL	ID SELETE	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	Sun City Center, FL. 33573	
ł I	PLANT CITY FL	(C) DELETE	3.3 STREET ADDRESS 3.4, CITY-ST-ZIP 4.1 TITLE	Sun City Center, FL. 33573	☐ Change
NAME	PLANT CITY FL V FLINN, MILTON		3.3 STREET ADDRESS 3.4, CITY-ST-ZIP 4.1 TITLE	Sun City Center, FL. 33573	☐ Change
NAME STREET ADDRESS	PLANT CITY FL V FLINN, MILTON 2020 CLUBHOUSE DR PO BOX		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITUE 4. 2 NAME 4.3 STREET ADDRESS	137 S. Pebble Black Blood. 34 Sun City Genter, FL. 33573 5TV Richard Hockinson 137 S. Pebble Beach Blood. Su	☐ Change
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NAME STREET ADDRESS CITY-ST-ZIP TITLE	PLANT CITY FL V FLINN, MILTON 2020 CLUBHOUSE DR PO BOX	5698	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	137 S. Pebble Black Black SUR. SU SUN City Center, FL. 33573 STV Richard Hickinson 137 S. Pebble Beach Blud. Su Sun City Center, FL. 33573 VAS	□ Change □ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PLANT CITY FL V FLINN, MILTON 2020 CLUBHOUSE DR PO BOX	5698	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.5 STREET ADDRESS 4.6 CITY-ST-ZIP 5.3 STREET ADDRESS	137 S. Pebble Black Blood. 30 Sun City Center, FL. 33573 STV Richard Hitchinson 137 S. Pebble Beach Blood. Su Sun City Center, FL. 33573 VAS Bobbitt, Jackie 132 S. Pebble Beach Blood. Sur	□ Change □ Addition
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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. CITY-ST-ZIP

6.4 CITY-ST-ZIP

Sun City Center, FL. 33573

ENDS HURFHINSON, VICE PRES. Y Jau 199 **SIGNATURE**