

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V48314** (1)

1. Corporation Name

MOONLIGHT GOLF ASSOCIATION, INC.



Principal Place of Business

**P.O. BOX 4232
SEMINOLE FL 34642**

Mailing Address

**P.O. BOX 4232
SEMINOLE FL 34645
US**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
06/29/1992

3a. Date of Last Report
06/13/1995

4. FEI Number

59-3133352

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

**MAGEE, FRANK D.
9095 122 WAY N
SEMINOLE FL 34642**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.004(2) and 607.150c, 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 607.004, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

Signature of Registered Agent

12. OFFICERS AND DIRECTORS

1.1 TITLE

**V
MAGEE, FRANK D
9095 122ND WAY NO
SEMINOLE FL**

☐ DELETE

2.1 TITLE

**P
MAGEE, MARY M
9095 122ND WAY NO
SEMINOLE FL**

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3.1 TITLE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

2.1 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

3.1 TITLE

32 NAME

33 STREET ADDRESS

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