

**2001 UNIFORM BUSINESS REPORT (UBR)**

1/2

**FILED**  
**Mar 01, 2001 8:00 am**  
**Secretary of State**

01-29-2001 90164 035 \*\*\*150.00

**DOCUMENT # H24567**

1. Entity Name  
**OAK HILLS GOLF AND COUNTRY CLUB INC.**

Principal Place of Business 10069 N. CLIFF BLVD. SPRING HILL FL 34608	Mailing Address 2550 N. LOOP WEST SUITE 400 HOUSTON TX 77092
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128095



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

4. FEI Number <b>59-2450052</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

8. Name and Address of Current Registered Agent  
**KETTLE, JOHN**  
**5284 ISLE WORTH COUNTRY CLUB DR**  
**WINDEMERE FL 34786**

7. Name and Address of New Registered Agent  
 Name **MARIA FLOYD**  
 Street Address (P.O. Box Number is Not Acceptable)  
**231 ROYAL PALM WAY, STE 100**  
**PALM BEACH, FL 33480**  
 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 *Randall Kettle* DATE **2-21-2001**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Waived  
**PLEASE SIGN**

11. OFFICERS AND DIRECTORS	
TITLE TD	<input checked="" type="checkbox"/> Delete KETTLE, JOHN 5284 ISLEWORTH COUNTRY CLUB DR WINDMERE FL
TITLE PD	<input type="checkbox"/> Delete FLOYD, RAYMOND 231 ROYAL PALM WAY STE 100 PALM BEACH FL 33480
TITLE SD	<input type="checkbox"/> Delete FLOYD, MARIA 231 ROYAL PALM WAY STE 100 PALM BEACH FL 33480
TITLE NAME	<input type="checkbox"/> Delete
TITLE NAME	<input type="checkbox"/> Delete
TITLE NAME	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>SD</b> <b>Randall Kettle</b>
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>5284 5284 Isleworth CC Dr</b>
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Windemere, FL 34786</b>
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Randall Kettle (Randall Kettle)* Date **Jan 17, 2001**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/00)