

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 331394 (7)

1. Corporation Name
MANAGEMENT SERVICES GOLF INC

Principal Place of Business MANAGEMENT SERVICES INC 3801 BAYVIEW DR FT. LAUDERDALE FL 33308 US	Mailing Address MANAGEMENT SERVICES INC 3801 BAYVIEW DR FT. LAUDERDALE FL 33308 US
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 06/18/1968	
4. FEI Number 59-1212310	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MCDONALD, MATTHEW S
 3801 BAYVIEW DRIVE
 FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name Darwell, Marjorie
82 Street Address (P.O. Box Number is Not Acceptable) 3801 Bayview Drive
83
84 City Ft. Lauderdale
85 Zip Code FL 33308

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 *Marjorie Darwell* **Marjorie Darwell, Secretary** **4/21/98**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	JONES, R T	
STREET ADDRESS	3801 BAYVIEW DRIVE	
CITY - ST - ZIP	FT. LAUDERDALE FL 33308	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	MCDONALD, MATTHEW S	
STREET ADDRESS	3801 BAYVIEW DRIVE	
CITY - ST - ZIP	FORT LAUDERDALE FL 33308	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	JONES, R L	
STREET ADDRESS	#10 BELLECLAIR PLACE	
CITY - ST - ZIP	MONTCLAIR NJ	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	JONES, R.T., JR.	
STREET ADDRESS	705 FOREST AVENUE	
CITY - ST - ZIP	PALO ALTO CA 94301	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Darwell, Marjorie
2.3 STREET ADDRESS	3801 Bayview Drive
2.4 CITY - ST - ZIP	Ft. Lauderdale, FL 33308
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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.

SIGNATURE: *Marjorie Darwell* **Marjorie Darwell, Secretary** **4/21/98 (954) 561-1870**

CR2E034 (10/97)