

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J32992

1. Corporation Name

Hacker Golf Inc. DBA/ House of Golf

Principal Place of Business

House of Golf/Hacker Golf Inc

Mailing Address

2055 Shepherd Rd.
Lakeland Fl. 33811

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Sept. 1984

3a. Date of Last Report

March 1994

4. FEI Number

59-2719159

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

2. Principal Place of Business

21 Lakeland Fl. - 2055 Shepherd Rd.

2a. Mailing Address

26 2055 Shepherd Rd.

Suite Apt # etc.

Suite Apt # etc.

22

27

City & State

23 Lakeland Florida

City & State

28 Lakeland Fl.

24 33811

25 U.S.

29 33811

30 U.S.

9. Name and Address of Current Registered Agent

John Paul Arkes, Attorney at Law
5300 South Florida Ave
P.O. Box 5378
Lakeland Fl. 33807 - 5378

10. Name and Address of New Registered Agent

81 Name

April Burt

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

1820 Mahaffey Circle

83

84 City

Lakeland Fl.

FL

85 Zip Code

33211

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

April Burt - (April Burt)

12. OFFICERS AND DIRECTORS

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

President - T
Gregory S. Clark
811 Magnolia Extension #21
Johnson City, TN. 37604

12.5 TITLE

12.6 NAME

12.7 STREET ADDRESS

12.8 CITY, ST, ZIP

Vice President - S
Kent S. Clark
5112 Fernbrook Lane
Lakeland Fl. 33813

12.9 TITLE

12.10 NAME

12.11 STREET ADDRESS

12.12 CITY, ST, ZIP

12.13 TITLE

12.14 NAME

12.15 STREET ADDRESS

12.16 CITY, ST, ZIP

12.17 TITLE

12.18 NAME

12.19 STREET ADDRESS

12.20 CITY, ST, ZIP

12.21 TITLE

12.22 NAME

12.23 STREET ADDRESS

12.24 CITY, ST, ZIP

12.25 TITLE

12.26 NAME

12.27 STREET ADDRESS

12.28 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST, ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, ST, ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY, ST, ZIP

☐ Change ☐ Addition

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****200.00 ****200.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(1)(b), Florida Statutes. I further certify that the information included 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 1, or Block 2, if changed, or on an attachment with an address.

SIGNATURE

Gregory S. Clark President

4-7-95

(615) 929-8669

Date

Signature Number 8