

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L93630 (6)**

1. Corporation Name
PRO GOLF DISCOUNT OF CLEARWATER, INC.



Principal Place of Business: **2881 A GULF TO BAY BLVD. CLEARWATER FL 34619**
Mailing Address: **2881 A GULF TO BAY BLVD. CLEARWATER FL 34619**

3. Date Incorporated or Qualified: **08/13/1990** 3a. Date of Last Report: **03/01/1995**
4. FEI Number: **59-3027041** 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

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

9. Name and Address of Current Registered Agent

**WILSON, WARREN A., III
31608 US HWY 19 N
PALM HARBOR FL 34684**

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 607.0502 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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE: **D** DELETE
NAME: **MILLS, RICHARD B.**
STREET ADDRESS: **2881 GULF-TO-BAY BLVD**
CITY - ST - ZIP: **CLEARWATER FL**

TITLE: **D** DELETE
NAME: **MILLS, GIOVANNA L.**
STREET ADDRESS: **2881 GULF-TO-BAY BLVD**
CITY - ST - ZIP: **CLEARWATER FL**

TITLE: DELETE
NAME: _____
STREET ADDRESS: _____
CITY - ST - ZIP: _____

TITLE: DELETE
NAME: _____
STREET ADDRESS: _____
CITY - ST - ZIP: _____

TITLE: DELETE
NAME: _____
STREET ADDRESS: _____
CITY - ST - ZIP: _____

TITLE: DELETE
NAME: _____
STREET ADDRESS: _____
CITY - ST - ZIP: _____

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or in an attachment with a new address.

SIGNATURE: *Richard B. Mills* **RICHARD B. MILLS** 2-26-96 (813) 726-7000
DATE: _____

CR2E034 (12/95)