


2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90072 044 ****70.00

DOCUMENT # N43244

1. Entity Name
CHILDREN'S GOLF FOUNDATIONA, INC.



Principal Place of Business
**7301 HAVERHILL RD
WEST PALM BEACH FL 33407
US**

Mailing Address
**7301 HAVERHILL RD
WEST PALM BEACH FL 33407
US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0262208** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**STUHLER, KEITH
10 LEXINGTON LANE EAST
PALM BEACH GARDENS FL 33418**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ASSELL, DAVID	
STREET ADDRESS	MORGAN STANLEY 2000 PGA BVD STE 4440	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408-2738	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MAIORANA, VITO	
STREET ADDRESS	2780 WILDERNESS ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	
TITLE	PD	<input type="checkbox"/> Delete
NAME	STUHLER, KEITH	
STREET ADDRESS	10 LEXINGTON LANE, EAST	
CITY-ST-ZIP	PALM BEACH GARDEN FL 33418	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MAREK, FRANK	
STREET ADDRESS	730 MAGNOLIA DRIVE	
CITY-ST-ZIP	LAKE PARK FL 33403	
TITLE	D	<input type="checkbox"/> Delete
NAME	REID, KURTIS A	
STREET ADDRESS	ENTPR. NATIONAL BANK 11811 US HWY ONE	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PLUMMER, BRYAN	
STREET ADDRESS	6602 66TH WAY	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEFF LIS	
STREET ADDRESS	STILES CORP, 300 S.E. 2nd ST.	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EARL MALLORY	
STREET ADDRESS	1907 Commerce Lane, Suite 104	
CITY-ST-ZIP	JUPITER, FL 33468-8858	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM T. O'LEARY	
STREET ADDRESS	NIKLAUS DESIGN, 11780 U.S. HIGHWAY #1	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BURTON WINER	
STREET ADDRESS	15851 WINDRIFT DRIVE	
CITY-ST-ZIP	JUPITER, FL 33477	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REID, KURTIS A	
STREET ADDRESS	5051 S.E. LISBON CIRCLE	
CITY-ST-ZIP	STUART, FL 34997	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ADAM W. TOWNSEND	
STREET ADDRESS	ONE CLEARLAKE CENTRE, SUITE 1200, 250 AUSTRALIAN AVE S.	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *U-01-07* *561-842-0066*

CR2E037 (10/02)