## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N97000002175

FILED Jul 05, 2006 Secretary of State

Certificate of Status Desired ( )

Entity Name: JUNIOR GOLF FOUNDATION OF AMERICA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

100 ST. DAVID'S WAY

WELLINGTON, FL 33414 WEST PALM BEACH, FL 33413

**Current Mailing Address: New Mailing Address:** 

4521 PGA BLVD. 200 CARIBE CT

#350 WEST PALM BEACH, FL 33413

FEI Number Applied For ( ) FEI Number: 65-0746961 FEI Number Not Applicable ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROMFH, NANCY A COBICK, MARY-LEE J 777 SOÚTH FLAGLER DRIVE 200 CARIBE CT

WEST PALM BEACH, FL 33413 US SUITE 900E

WEST PALM BEACH, FL 33401 US

PALM BEACH GARDENS, FL 33418

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: MARY-LEE COBICK 07/05/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete () Change () Addition

LEVIN, ROBERT MD Name: Name: Address: 1640 S. CONGRESS AVE. # 103 Address: City-St-Zip: LAKE WORTH, FL 33461 US City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

HAYDUK, RICHARD Name: Name: WHITE, DONNA H Address: 4521 PGA BLVD. # 350 Address: 200 CARIBE CT

City-St-Zip: PALM BEACH GARDENS, FL 33418 US City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: () Delete Title: (X) Change ( ) Addition

WEIR, WILLIAM R Name: COBICK, MARY-LEE J Name:

1515 WOOD DALE TERRACE 200 CARIBE CT Address: Address:

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WEST PALM BEACH, FL 33413

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY-LEE COBICK Т 07/05/2006