

# FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 PM 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P18298 (0)

1. Corporation Name

NATIONAL GOLF FOUNDATION CONSULTING, INC.

Principal Place of Business

Mailing Address

1150 SOUTH U.S. HIGHWAY 1  
SUITE 401  
JUPITER FL 33477  
US

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SUITE 401  
JUPITER FL 33477  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/04/1988 3a. Date of Last Report 03/01/1994  
4. FEI Number 65-0074324 Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title of applicant

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE V  
NAME NORTON, RICK  
STREET ADDRESS 1150 S. U.S. HWY. ONE, SUITE 401  
CITY - ST - ZIP JUPITER FL

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

TITLE P  
NAME BEDITZ, JOSEPH  
STREET ADDRESS 1150 S. U.S. HWY. ONE, SUITE 401  
CITY - ST - ZIP JUPITER FL

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

TITLE S  
NAME O'GRADY, PATRICK  
STREET ADDRESS 147 CENTRE STREET  
CITY - ST - ZIP BROCKTON MA

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

TITLE VC  
NAME ABRAIN, ED.  
STREET ADDRESS 8700 W. BRYNMAWR, THIRD FLOOR  
CITY - ST - ZIP CHICAGO IL

41 TITLE ☒ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

TITLE C  
NAME VAN DYKE, ED  
STREET ADDRESS 1150 S. U.S. HWY. ONE, SUITE 401  
CITY - ST - ZIP JUPITER FL

51 TITLE ☒ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

TITLE T  
NAME BONANNI, PETER  
STREET ADDRESS TWO PARK AVENUE  
CITY - ST - ZIP NEW YORK NY

61 TITLE ☒ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 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 110.07(3)(b), 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 this corporation or a receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

JOSEPH BEDITZ

April 28, 1995 (407) 744-6006

Date

Telephone