

**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 # P92000003337 (2)

1. Corporation Name  
**JIM FAZIO INTERNATIONAL GOLF DESIGN, INC.**



Principal Place of Business Mailing Address  
1225 US HWY ONE STE 203 JUNO BEACH FL 33408

3. Date Incorporated or Qualified 11/04/1992  
3a. Date of Last Report 04/13/1995

2. Principal Place of Business 21 14255 US HWY 1  
Suite, Apt. #, etc. 22 SUITE 203  
City & State 23 JUNO BEACH FL  
Zip 24 33408 Country 25 USA

2a. Mailing Address 26 14255 US HWY 1  
Suite, Apt. #, etc. 27 SUITE 203  
City & State 28 JUNO BEACH FL  
Zip 29 33408 Country 30 USA

4. FEI Number 65-0371030 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

9. Name and Address of Current Registered Agent  
FAZIO, VINCENT M  
1225 US HWY ONE  
STE 203  
JUNO BEACH FL 33408

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable) 14255 US Hwy 1 #203  
83  
84 City  
85 Zip Code FL

Address only →

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 if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> DELETE
NAME	FAZIO, VINCENT M	
STREET ADDRESS	1225 US HWY ONE #203	
CITY-ST-ZIP	JUNO BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	FAZIO, JAMES M.	
STREET ADDRESS	113 SCHOONER LANE	
CITY-ST-ZIP	JUPITER FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	FAZIO, THOMAS J.	
STREET ADDRESS	10121 DAPHNE AVE.	
CITY-ST-ZIP	PALM BCH. GARDENS FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	14255 US Hwy 1 #203
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	14255 US Hwy 1 #203
2.4 CITY-ST-ZIP	JUNO BEACH FL 33408
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	14255 US Hwy 1 #203
3.4 CITY-ST-ZIP	JUNO BEACH FL 33408
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	500001833945
5.4 CITY-ST-ZIP	-05/22/96--01020--037
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	***200.00

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 if changed, or on an attachment with an address.

SIGNATURE: *Vincent M Fazio* VINCENT M FAZIO 1-24-96 (407) 627-3208  
Date Daytime Phone #

CR2E034 (12/95)