

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

DOCUMENT # S04584 (6)

95 JUL -3 AM 8:06

1. Corporation Name

UNITED STATES SENIOR GOLF ACADEMY, INC.

Principal Place of Business

Mailing Address

**POST OFFICE BOX 410039
MELB. FL 32904-7339**

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MELB. FL 32904-7339**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/01/1990

3a. Date of Last Report

02/01/1994

4. FID Number

59-3104976

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Electronic Filing Preferred

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 197(03) Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. # etc.

26 State, Apt. # etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

9. Name and Address of Current Registered Agent

**SMITH, ROY V., JR.
775 HAWKS BILL IS DR.
SATELLITE BCH. FL 32937**

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of present registered agent and the applicable

(Signature of new registered agent and the applicable

(Date)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

**D
SMITH, ROY, JR.
775 HAWKSBILL ISLAND DR.
SATELLITE BEACH FL**

**D
FIRRIOLO, ROSANNE
775 HAWKS BILL IS DR
SAT. BCH. FL**

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (SEE INSTRUCTIONS)

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

Change Action

Change Action

Change Action

Change Action

Change Action

Change Action

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 197(07)(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 registration does have the same legal effect as if made under oath. I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on (Back 12) of Block 12 (changed). My office address is: _____

SIGNATURE: *Roy V. Smith Jr* **Roy V. Smith JR 6/28/95 407-729-9717**

CR2E034 (3/95)