

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764684

**Entity Name:** MIAMI GOLF CONNECTION, INCORPORATED**Current Principal Place of Business:**350 SO HOLLYBROOK TER  
BLDG 49 #208  
PEMBROKE PINES, FL 33025**Current Mailing Address:**P.O. BOX 173933  
MIAMI GARDENS, FL 33017 US**FEI Number:** 59-2116703**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MORGAN, SAM  
350 SO HOLLYBROOK TER  
BLDG 49 #208  
PEMBROKE PINES, FL 33025 US*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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	MORGAN, SAMUEL
Address	350 SO HOLLYBROOK TER BLDG 49 #208
City-State-Zip:	PEMBROKE PINES FL 33025

Title	PARLIAMENTARIAN
Name	BUTLER, GEORGE
Address	3771 ENVIRON BLVD. #748
City-State-Zip:	LAUDERHILL FL 33319

Title	SECRETARY
Name	JONES, WILLIE
Address	8861 S. W. 9TH CT.
City-State-Zip:	PEMBROKE PINES FL 33025

Title	DIRECTOR
Name	WILLIAMS, FRED
Address	2102 N. W. 172ND ST
City-State-Zip:	MIAMI GARDENS FL 33056

Title	TREASURER
Name	CHISHOLM, RICHARD
Address	3900 S.W. 145TH AVE
City-State-Zip:	MIRAMAR FL 33027

*I hereby 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 all other like empowered.*

**SIGNATURE: SAMUEL L. MORGAN****PRESIDENT****01/11/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date