

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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:** No

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

Title            TREASURER  
Name            HAZELTON, JOHN JR C  
Address        6051 N. W. 201 LANE  
City-State-Zip: HIALEAH FL 33015

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

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

*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**

**02/06/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date