

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000066607

**Entity Name:** STINE GOLF ENTERPRISES, INC.

**Current Principal Place of Business:**

1118 MASSACHUSETTS AVE  
#2  
SAINT CLOUD, FL 34769

**Current Mailing Address:**

1118 MASSACHUSETTS AVE  
#2  
SAINT CLOUD, FL 34769 US

**FEI Number:** 59-3276796

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STINE, THOMAS L  
4702 SE CHEERIO WAY  
STUART, FL 34997 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	P	Title	AUTHORIZED REPRESENTATIVE
Name	STINE, THOMAS L	Name	WARREN, PAM
Address	4702 SE CHEERIO WAY	Address	1118 MASSACHUSETTS AVE #2
City-State-Zip:	STUART FL 34997	City-State-Zip:	SAINT CLOUD FL 34769

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS L STINE

P

03/29/2016

Electronic Signature of Signing Officer/Director Detail

Date