

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 22, 2001 8:00 am
Secretary of State

05-22-2001 90670 001 ***750.00

DOCUMENT # 179598

1. Entity Name
FEDERAL GOLF, INC.

Principal Place of Business 3801 BAYVIEW DRIVE FORT LAUDERDALE FL 33308 US	Mailing Address C/O CONTROLLER 3801 BAYVIEW DRIVE FORT LAUDERDALE FL 33308 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address c/o CFO, ACCOUNTING Suite, Apt. #, etc. 3801 Bayview Drive
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City & State	Ft. Lauderdale, FL
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Zip	Country	Zip	Country
33308	USA	33308	USA

4. FEI Number **59-6060421**

Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DARWELL, M
3801 BAYVIEW DR
1
FORT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name **CORPORATION COMPANY OF MIAMI**

Street Address (P.O. Box Number is Not Acceptable) **1600 Miami Center (GIP)**

201 S. Biscayne Blvd.

City **Miami** FL Zip Code **33131-9767**

8. The above information is true and correct for the purposes of changing the registered office or registered agent, or both, in the State of Florida.

SIGNATURE *George I. Platt* (George I. Platt) DATE **4-30-01**

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JONES, R T 3801 BAYVIEW DR FT LAUDERDALE FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DARWELL, M 3801 Bayview Drive Fort Lauderdale FL 33308 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATLAND, VIC 2870 E. OAKLAD PARK BLVD. FORT LAUDERDALE FL 33306 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JONES, R.T., JR. 705 FOREST AVE PALO ALTO CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EB D/C JONES, R.T., JR. 705 Forest Avenue Palo Alto, CA 94301 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/C JONES, REES L. 55 South Park Street Montclair, NJ 07042 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD CARR, WILLIAM T. 5 Woodland Avenue Bronxville, NY 10708 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOODWILLIE, EUGENE W. 1155 Avenue of the Americas New York, NY 10036 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Martorie Darwell* **MARTORIE DARWELL** **4-30-01** **954-561-1870**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)