

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 199515

FILED
Mar 28, 2008
Secretary of State

Entity Name: THE AMERICAN GOLFER'S CLUB INC.

Current Principal Place of Business:

3801 BAYVIEW DRIVE
FT LAUDERDALE, FL 33308 US

New Principal Place of Business:

3801 BAYVIEW DRIVE
ATTN: ACCOUNTING
FT LAUDERDALE, FL 33308 US

Current Mailing Address:

C/O CFO ACCOUNTING
3801 BAYVIEW DRIVE
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

3801 BAYVIEW DRIVE
ATTN: ACCOUNTING
FT LAUDERDALE, FL 33308 US

FEI Number: 59-0789877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF ORLANDO
300 S. ORANGE AVE., SUITE 1000(JGH)
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVST () Delete
Name: DAYHOFF, MICHAEL R.
Address: 4250 N. FEDERAL HWY.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: DPS () Delete
Name: SMITH, PHILIP P.
Address: 4250 N/ FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D () Delete
Name: JONES, REES L
Address: 55 S PARK STREET
City-St-Zip: MONTCLAIR, NJ 07042

Title: DV () Delete
Name: SCOTT, JAMES A.
Address: 4250 N. FEDERAL HWY.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: CFO (X) Delete
Name: HUNT, PAULA J
Address: 3801 BAYVIEW DR
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVST (X) Change () Addition
Name: DAYHOFF, MICHAEL R
Address: 4250 N. FEDERAL HWY.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: DPS (X) Change () Addition
Name: SMITH, PHILIP P
Address: 4250 N/ FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL R. DAYHOFF

DVST

03/28/2008

Electronic Signature of Signing Officer or Director

_____ Date