FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 27 PM 3:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 430343 (4)

1. Corporation Name
GOLFER'S WORLD, INC.

Principal Place of Business	Mailing Address
3698 NORTH FEDERAL HIGHWAY BOCA RATON FL 33431-5948	3698 NORTH FEDERAL HIGHWAY BOCA RATON FL 33431-5948

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/10/1973
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business	2a. Mailing Address
21 BOYNTON BEACH, FL. 33436	26 4471 MEADOWLARK LN
Suite, Apt. #, etc. 22 4471 MEADOWLARK LN	Suite, Apt. #, etc. 27
City & State 23 BOYNTON BEACH, FL.	City & State 28 BOYNTON BEACH, FL.
Zip / Country 24 33436 / 25 PALM BEACH	Zip / Country 29 33436 / 30 PALM BEACH

4. FEI Number: 59-1563451 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NORMAN T. MEYER
3698 N. FEDERAL HWY.
BOCA RATON, FL
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name: NORMAN T. MEYER
82 Street Address (P.O. Box Number is Not Acceptable): 4471 MEADOWLARK LANE
83: BOYNTON BEACH
84 City: FL 85 Zip Code: 33436

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Norman T. Meyer 3/21/95
Signature, typed or printed name of registered agent is also required if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P ☐ Change ☐ Addition
NAME	MEYER, NORMAN	1.2 NAME	MEYER, NORMAN
STREET ADDRESS	3698 N FEDERAL HWY	1.3 STREET ADDRESS	4471 MEADOWLARK LANE
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	BOYNTON BEACH, FL. 33436
TITLE	S	2.1 TITLE	V ☑ Change ☐ Addition
NAME	KOZDEBA, JOS.	2.2 NAME	~~NANCY~~ MEYER, NANCY
STREET ADDRESS	230 NE 28TH RD.	2.3 STREET ADDRESS	4471 MEADOWLARK LANE
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	BOYNTON BEACH, FL. 33436
TITLE	T	3.1 TITLE	☐ Change ☐ Addition
NAME	STRATTON, MARIE	3.2 NAME	
STREET ADDRESS	7686 CYPRESS CRESENT	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Norman T. Meyer NORMAN T. MEYER PRESIDENT 3/21/95 407/738-4513
(TYPED OR PRINTED NAME OF INDIVIDUAL AND TITLE OF OFFICER OR DIRECTOR) Date Daytime Phone #

03M207 CR