

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 461035

FILED
Aug 26, 2005
Secretary of State

Entity Name: GOLF HOST SECURITIES, INC.

Current Principal Place of Business:

36750 U.S. HWY. 19 N.
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

36750 U.S. HWY. 19 N.
PALM HARBOR, FL 34684 US

New Mailing Address:

FEI Number: 59-1566781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKETT AVE., STE 3000
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WILT, RICHARD K
Address: 36750 US HWY 19 NORTH
City-St-Zip: PALM HARBOR, FL 34684

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WILT, RICHARD K
Address: 36750 US HWY 19 NORTH
City-St-Zip: PALM HARBOR, FL 34684 US

Title: CEO () Change (X) Addition
Name: BLAIR, W. BRADLEY II
Address: 14 ADGERS WHARF
City-St-Zip: CHARLSTON, SC 29401 US

Title: VP () Change (X) Addition
Name: CURRELLY, RANDAL A
Address: 36750 US HWY 19 NORTH
City-St-Zip: PALM HARBOR, FL 34684 US

Title: T () Change (X) Addition
Name: CLIFFORD, TRACY
Address: 14 ADGERS WHARF
City-St-Zip: CHARLSTON, SC 29401 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: R. KEITH WILT

VP

08/26/2005

Electronic Signature of Signing Officer or Director

Date