## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 15, 2007 08:00 A Secretary of State

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1. Entity Name

JUNGLE GOLF OF FORT MYERS, INC.



Principal Place of Business

Mailing Address

SAN CARLOS BLVD

FT MYERS BCH, FL 33931 U

1064 SEA MOUNTAIN HWY NORTH MYRTLE BEACH, SC 29582



## DO NOT WRITE IN THIS SPACE

01232007 No Chg-P CR2E034 (11/05)

Applied For Not Applicable

59-1743477

5. Certificate of Status Desired

4. FEI Number

\$8.75 Additional

6. Name and Address of Current Registered Agent

LEE, SCOTT W 241 E RUBY AVE SUITE D KISSIMMEE, FL 34741

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and file if applicable.

(NOTE, Registered Agent signature required when reinstating)

П

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees U00000667868 03/27/07-80005-011 150.00

10. OFFICERS AND DIRECTORS D TITLE **BELL, MARVIE J** NAME STREET ADDRESS 126 NORTHGATE ROAD - BRIARCLIFFE CITY-ST-ZIP MYRTLE BEACH, SC 29572 ST TITLE TIRRELL, ELVIN D NAME STREET ADDRESS **ROUTE 3** CITY-ST-ZIP GILIVANTS FERRY, SC TITLE MERRELL, THOMAS A JR. NAME STREET ADDRESS 104 HOLLY LANE MYRTLE BEACH, SC 29572 CITY-ST-ZIP TITLE LEE, SCOTT W NAME 2261 MAIN SAIL COVE STREET ADDRESS KISSIMMEE, FL 34741 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Thomas A Merrell