


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **557487** (6)  
1. Corporation Name  
**JERRY PATE GOLF, INC.**

Principal Place of Business <b>125 W. ROMANA STREET, SUITE 800 P.O. BOX 13010 PENSACOLA FL 32501</b>	Mailing Address <b>125 W. ROMANA STREET, SUITE 800 P.O. BOX 13010 PENSACOLA FL 32501</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**01/10/1978**

2. Principal Place of Business 21 <b>100 E. Roberts Rd.</b> Suite, Apt. #, etc. 22 City & State <b>Pensacola</b> 23 Zip <b>91</b> Country <b>32534</b>	2a. Mailing Address 26 <b>P.O. Box 1185</b> Suite, Apt. #, etc. 27 City & State <b>Pensacola</b> 28 Zip <b>91</b> Country <b>32534</b>
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4. FEI Number  
**59-1794365**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent  
**STACKHOUSE, HARRY B.  
125 W. ROMANA STREET  
SUITE 800  
PENSACOLA FL 32501**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<b>PD</b> <input type="checkbox"/> DELETE
NAME	<b>PATE, JEROME K.</b>
STREET ADDRESS	<b>102 S ALGAMIZ STREET</b>
CITY-ST-ZIP	<b>PENSACOLA FL</b>
TITLE	<b>ST</b> <input type="checkbox"/> DELETE
NAME	<b>PATE, SUSAN N.</b>
STREET ADDRESS	<b>100 S ALGAMIZ STREET</b>
CITY-ST-ZIP	<b>PENSACOLA FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>5 Hyde Park Rd.</b>
1.4 CITY-ST-ZIP	<b>Pensacola, FL 32502</b>
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>5 Hyde Park Road</b>
2.4 CITY-ST-ZIP	<b>Pensacola, FL 32502</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 **Jerome K. Pate** **1-20-98** **850-**  
**918-0231**

CR2E034 (10/97)