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Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **650761** **(0)**

1. Corporation Name
FOR THE LOVE OF GOLF, INC.

Principal Place of Business	Mailing Address
4700 N. TAMIAMI TRAIL NAPLES FL 33940	4700 N. TAMIAMI TRAIL NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9765 N. TAMIAMI TRAIL	2a. Mailing Address 26 9765 N. TAMIAMI TRAIL	3. Date Incorporated or Qualified 01/10/1980	
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2097161	☐ Applied For ☐ Not Applicable
City & State 23 NAPLES, FL.	City & State 28 NAPLES, FL.	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip 24 34108 Country 25 U.S.A.	Zip 29 34108 Country 30 U.S.A.	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

PODOLSKI, MICHAEL
4700 N. TAMIAMI TRAIL
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name PODOLSKI, MICHAEL
82 Street Address (P.O. Box Number is Not Acceptable) 9765 N. TAMIAMI TRAIL
83
84 City NAPLES **FL** 85 Zip Code 34108

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 MICHAEL J. PODOLSKI - PRESIDENT Michael J. Podolski 4/13/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PODOLSKI, FLORINE		1.2 NAME		
STREET ADDRESS	3770 FIELDSTONE BLVD #1504		1.3 STREET ADDRESS	9765 N. TAMIAMI TRAIL	
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP	NAPLES, FL 34108	
TITLE	P	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PODOLSKI, MICHAEL		2.2 NAME		
STREET ADDRESS	3770 FIELDSTONE BLVD #1504		2.3 STREET ADDRESS	9765 N. TAMIAMI TRAIL	
CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP	NAPLES, FL 34108	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	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 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: Michael J. Podolski 4/13/98 941-566-3395

CR2E034 (10/97)