

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764684

FILED
Apr 23, 2007
Secretary of State

Entity Name: MIAMI GOLF CONNECTION, INCORPORATED

Current Principal Place of Business:

18865 S.W. 29TH ST
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 173933
MIAMI GARDENS, FL 33017 US

New Mailing Address:

FEI Number: 59-2116703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKS, VICKI L
18865 S.W. 29TH ST
PEMBROKE PINES, FL 33029 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: DP () Delete
Name: HICKS, VICKI L
Address: 18865 S.W. 29TH ST
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: DS () Delete
Name: HARRIET, HAWKINS
Address: P.O. BOX 260218
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: DT () Delete
Name: MORGAN, SAMUEL L
Address: 19560 NW 84TH AVENUE
City-St-Zip: MIAMI LAKES, FL 33015 US

Title: DC () Delete
Name: SANK, NORMAN
Address: 8921 PALMTREE LANE
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: DVP () Delete
Name: SMITH, EDDIE
Address: 9170 TAFT STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SMITH, EDDIE
Address: 9170 TAFT STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: DS (X) Change () Addition
Name: SMITH, EDDIE
Address: 9170 TAFT STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: DT (X) Change () Addition
Name: LAROSA, JOHANNA
Address: 17010 N.W. 46TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33056 US

Title: DC (X) Change () Addition
Name: HICKS, VICKI
Address: 18865 S.W. 29TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: DVP (X) Change () Addition
Name: MORGAN, SAMUEL L
Address: 19560 N. W. 84TH AVENUE
City-St-Zip: MIAMI LAKES, FL 33015 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL L. MORGAN

DVP

04/23/2007

Electronic Signature of Signing Officer or Director

Date