


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

103

CORPORATION
REINSTATEMENT
2005 AR

 **FLORIDA DEPARTMENT OF STATE**
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUN 24 PM 4:16
SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # 842260

1. Corporation Name
Acushnet Company

2. Principal Office Address 333 Bridge Street Suite, Apt. #, etc.		3. Mailing Office Address P.O. Box 965 Suite, Apt. #, etc.	
City & State Fairhaven, MA		City & State Fairhaven, MA	
Zip 02719	Country	Zip 02719-0965	Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 04-2591836 **Applied For**
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **\$8.75 Additional Fee required for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name
United States Corporation Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, Etc.
Suite 105

City
Tallahassee

State FL **Zip Code** 32301

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

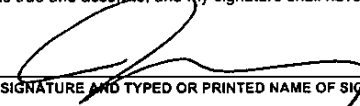
Signature of Registered Agent _____ **Date** _____

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
		See Attachment "A"	

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:  **John Hardy** **6/26/05** **508-979-2000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

CR2E081 (01/05)

Attachment "A"

Officers:

Walter R. Uihlein
333 Bridge Street
Fairhaven, MA 02719

Chairman and Chief Executive Officer

James M. Connor
333 Bridge Street
Fairhaven, MA 02719

President – FootJoy

Herbert C. Boehm
333 Bridge Street
Fairhaven, MA 02719

Executive Vice President and
General Manager – Golf Ball Operations

John Worster
333 Bridge Street
Fairhaven, MA 02719

Executive Vice President, Golf Club
Operations

Gerald M. Bellis
333 Bridge Street
Fairhaven, MA 02719

Senior Vice President, Sales and Marketing-
Titleist and Cobra

Dennis D. Doherty
333 Bridge Street
Fairhaven, MA 02719

Senior Vice President, Human Resources

Joseph J. Nauman
333 Bridge Street
Fairhaven, MA 02719

Senior Vice President, General Counsel
and Assistant Secretary

Margaret G. Nicholson
333 Bridge Street
Fairhaven, MA 02719

Senior Vice President and Chief
Information Office

William C. Burke
333 Bridge Street
Fairhaven, MA 02719

Senior Vice President and Chief
Financial Officer

Mark Hausberg
300 Tower Parkway
Lincolnshire, IL 60069

Treasurer

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Mark A. Roche
300 Tower Parkway
Lincolnshire, IL 60069

Secretary

Matthew C. Lenz
300 Tower Parkway
Lincolnshire, IL 60069

Assistant Treasurer

Roland A Giroux
333 Bridge Street
Fairhaven, MA 02719

Assistant Secretary

Russell W. Hahn
300 Tower Parkway
Lincolnshire, IL 60069

Assistant Secretary

John E. Hardy
333 Bridge Street
Fairhaven, MA 02719

Assistant Secretary

Troy R. Lester
333 Bridge Street
Fairhaven, MA 02719

Assistant Secretary