## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 01, 2004 8:00 am **Secretary of State** 03-01-2004 90048 013 \*\*\*150.00 **DOCUMENT #843035** PALMER COURSE DESIGN COMPANY 94022437 Principal Place of Business Mailing Address IMG CENTER IMG CENTER SUITE 100, 1360 E 9TH ST SUITE 100, 1360 E 9TH ST CLEVELAND, OH 44114-782 US CLEVELAND, OH 44114-782 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02172004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 34-0896816 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Ree Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 City Zip Code 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 title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete Change Addition NAME SEAY, EDWIN B NAME IMG CENTER, SUITE 100, 1360 E 9TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEVELAND, OHIO 00000, 441141782 CITY-ST-ZIP Change TITLE ☐ Delete TITLE Addition TD ZUGAY, JACK NAME NAME STREET ADDRESS IMG CENTER, SUITE 100, 1360 E 9TH ST STREET ADDRESS CHY-ST-ZIP CLEVELAND, OHIO 00000, 441141782 CHY-ST-ZIP Delete \_\_\_\_ HILE Change Addition PALMER, ARNOLD D NAME NAME STREET ADDRESS IMG.CENTER, SUITE 100, 1360 E 9TH ST STREET ADDRESS CHY-ST-7IP CLEVELAND, OHIO 00000, 441141782 CITY-ST-ZIP Delete Addition TITLE TITLE Change MCCORMACK, MARK H NAME ERI LARSEN STREET ADDRESS IMG CENTER, SUITE 100, 1360 E 9TH ST STREET ADDRESS IME CENTER, SUITE 100, 1360 E. 9 TH ST. CITY-ST-ZIP CLEVELAND, OHIO 00000, 441141782 CITY-ST-ZIP 44114-1782 ☐ Delete TITLE Change ☐ Addition LAFAVE, ARTHUR J, JR NAME IMG CENTER, SUITE 100, 1360 E 9TH ST STREET ADDRESS STREET ADDRESS CLEVELAND, OHIO 00000, 441141782 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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12. 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 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

CITY-ST-ZIP

CITY-ST-ZIP

TREASURER 1216)522-1200 SIGNATURE: