

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001274

Entity Name: ASHWORTH STORE I, INC.

FILED  
Mar 21, 2008  
Secretary of State

## Current Principal Place of Business:

2700 STATE ROAD 16  
#607  
SAINT AUGUSTINE, FL 32092

## New Principal Place of Business:

## Current Mailing Address:

2765 LOKER AVE WEST  
CARLSBAD, CA 920106601

## New Mailing Address:

2765 LOKER AVE WEST  
CARLSBAD, CA 920106601 US

FEI Number: 33-0560246

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete  
Name: WEIL, PETER  
Address: 2765 LOKER AVE W.  
City-St-Zip: CARLSBAD, CA 920106601

Title: DS ( ) Delete  
Name: BALYS, HALINA  
Address: 2765 LOKER AVE WEST  
City-St-Zip: CARLSBAD, CA 920106601

Title: VD ( ) Delete  
Name: SLACK, GREG  
Address: 2765 LOKER AVE W.  
City-St-Zip: CARLSBAD, CA 920106601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD (X) Change ( ) Addition  
Name: FLETCHER, ALLAN  
Address: 2765 LOKER AVE W.  
City-St-Zip: CARLSBAD, CA 920106601

Title: VPSD (X) Change ( ) Addition  
Name: BALYS, HALINA  
Address: 2765 LOKER AVE WEST  
City-St-Zip: CARLSBAD, CA 920106601

Title: CFOD (X) Change ( ) Addition  
Name: SLACK, GREG  
Address: 2765 LOKER AVE W.  
City-St-Zip: CARLSBAD, CA 920106601

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUE CALLAWAY

AM

03/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date