

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**5 Jul 10, 2008 8:00 am
Secretary of State**

05-30-2008 90218 009 ***150.00

DOCUMENT # F06000002537

1. Entity Name
GOLFNET, INC.



Principal Place of Business

**5 DOWD CIRCLE
SUITE B
PINEHURST, NC 28374**

Mailing Address

**5 DOWD CIRCLE
SUITE B
PINEHURST, NC 28374**

66015172



04302008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-1305778

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STROMBERG, MARCIA D
16000 WEST BAY DRIVE, #159
JUPITER, FL 33477**

**DO NOT WRITE
IN THIS SPACE**

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 if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
SCHWARTZ, STEVEN
5 DOWD CIRCLE SUITE B
PINEHURST, NC 28374**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COO
DENNIS, PETER
5 DOWD CIRCLE, SUITE
PINEHURST, FL 28374**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPO
STROMBERG, ERIK H
5 DOWD CIRCLE, SUITE B
PINEHURST, NC 28374**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CFO
GIDEON, PETER
5 DOWD CIRCLE, SUITE B
PINEHURST, NC 28374**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/13/08

Date

910-215-8200x105

Daytime Phone #

ATTACHMENT
66015172
P06000002537



GolfNet
Extending the Game
Beyond the Course™

Patrick Maginnis
Controller
5 Dowd Circle, Suite B
Pinehurst, NC 28374
Office: 910-215-8800 Ext. 105

Date: June 30, 2008

To Whom it may concern:

Please find enclosed are signed annual report, this sat on the desk of an individual who is no longer with the company hence the reason for the delay. Thank you for taking that into consideration as reason to waive any additional fees

Sincerely

Patrick Maginnis
Controller