

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-30-2001 90339 004 ***150.00

DOCUMENT # F94000003936

1. Entity Name
WESTERN GOLF PROPERTIES, INC.

Principal Place of Business 7711 EAST GREENWAY ROAD SCOTTSDALE AZ 85260	Mailing Address 7711 EAST GREENWAY ROAD SCOTTSDALE AZ 85260
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UU029847



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **86-0500159**

Applied For
 Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**B&C COPRRATE SERVICES OF CENTRAL FLORIDA,
 390 N. ORANGE AVE., STE. 1100
 ORLANDO FL 32801**

Name		
Street Address (P.O. Box Number is Not Acceptable)		
City	FL	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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D <input type="checkbox"/> Delete
NAME	DICKEY, VERDE V
STREET ADDRESS	4340 N. 42ND AVE.
CITY-ST-ZIP	PHOENIX AZ 85019

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	DP <input type="checkbox"/> Delete
NAME	BLACK, JOE E
STREET ADDRESS	7711 E. GREENWAY ROAD
CITY-ST-ZIP	SCOTTSDALE AZ 85260

TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLACK, JOE E.
STREET ADDRESS	7711 E. GREENWAY ROAD
CITY-ST-ZIP	SCOTTSDALE, AZ 85260

TITLE	DST <input type="checkbox"/> Delete
NAME	DICKEY, RUSSELL S
STREET ADDRESS	4340 N. 42ND AVE.
CITY-ST-ZIP	PHOENIX AZ

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EDGMON, HUGH
STREET ADDRESS	7711 E. GREENWAY ROAD
CITY-ST-ZIP	SCOTTSDALE, AZ 85260

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Russell Dickey
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/10/01 Daytime Phone #: 602 272 1347

CR2E034 (10/00)