

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # F95000003947 (7)

1. Corporation Name

BRASSIE GOLF CORPORATION

Principal Place of Business

C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

Mailing Address

C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

KRAUMANIS, SVEN
C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

3. Date Incorporated or Qualified

08/14/1995

3a. Date of Last Report

4. FEI Number

56-1781650

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

Signature typed or printed in block, with last name in all capital letters

Date typed or printed in block, with last name in all capital letters

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

C
EWART, GORDON D
C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

C
ATKINSON, ROBERT G
C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
IRWIN, MALE S
C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VTDC
NACHT, GARY A
C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PDC
HORNE, WILLIAM E
C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
RICHARDSON, THOMAS K
C/O 5806-A BRECKENRIDGE PKWY
TAMPA FL 33610

☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/96

Signature Printed Name

CR2E034 (12/95)