


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005 8:00 am
Secretary of State

03-30-2005 90031 038 ***150.00

| | | | | | |
|---|--|--|---|---|--|
| DOCUMENT # F96000000084 1. Entity Name CALLAWAY GOLF SALES COMPANY | | | |  | |
| Principal Place of Business 2180 RUTHERFORD RD CARLSBAD, CA 92008 US | | | Mailing Address 2180 RUTHERFORD RD CARLSBAD, CA 92008 US | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | | 3. Mailing Address Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | | Country | | 4. FEI Number 33-0533922 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 | | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City | |
| 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. | | | | \$8.75 Additional Fee Required | |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div> FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 </div> <div> 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> </div> <div> \$5.00 May Be Added to Fees </div> </div> | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD URZETTA, JOSEPH 2180 RUTHERFORD RD CARLSBAD, CA 92008 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D/C Baker, William C. 2180 Rutherford Road Carlsbad, CA 92008 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD HOLIDAY, BRADLEY J 2180 RUTHERFORD RD CARLSBAD, CA 92008 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Holiday, Bradley J. 2180 Rutherford Road Carlsbad, CA 92008 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD MCCRACKEN, STEVEN C 2180 RUTHERFORD RD CARLSBAD, CA 92008 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D McCracken, Steven C. 2180 Rutherford Road Carlsbad, CA 92008 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CCED DRAPEAU, RONALD A 2180 RUTHERFORD RD CARLSBAD, CA 92008 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P Melican, John 2180 Rutherford Road Carlsbad, CA 92008 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HUTIN, PATRICE 2180 RUTHERFORD RD CARLSBAD, CA 92008 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T Maloy, Julie M. 2180 Rutherford Road Carlsbad, CA 92008 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS OLDHAM, ANNE M 2180 RUTHERFORD RD CARLSBAD, CA 92008 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | S Black, Melissa K. 2180 Rutherford Road Carlsbad, CA 92008 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 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. | | | | | |
| SIGNATURE: <u>Melissa Black</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | Melissa K. Black, Secretary Date: <u>3/21/05</u> Daytime Phone #: <u>1(760) 931-1771</u> | | |

ATTACHMENT

40042213

CALLAWAY GOLF SALES COMPANY

#1960000000

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (CONTINUED)

TITLE: V

NAME: Barthelmess, Ann E.

STREET ADDRESS: 2180 Rutherford Road

CITY-ST-ZIP: Carlsbad, CA 92008

TITLE: General Counsel

NAME: Rider, Michael J.

STREET ADDRESS: 2180 Rutherford Road

CITY-ST-ZIP: Carlsbad, CA 92008