

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006285

FILED  
Feb 11, 2011  
Secretary of State

**Entity Name:** TEAM CLASSIC GOLF SERVICES, INC.

**Current Principal Place of Business:**

16301 PHIL RITSON WY  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

**Current Mailing Address:**

16301 PHIL RITSON WY  
WINTER GARDEN, FL 34787 US

**New Mailing Address:**

**FEI Number:** 59-3208255

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GERLANDER, BRUCE  
16301 PHIL RITSON WY  
WINTER GARDEN, FL 34787 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

**OFFICERS AND DIRECTORS:**

**Title:** DC  
**Name:** GIFFORD, ROBERT P  
**Address:** 599 LEXINGTON AVE  
**City-St-Zip:** NEW YORK, NY 10022

**Title:** DP  
**Name:** GERLANDER, BRUCE  
**Address:** 16301 PHIL RITSON WAY  
**City-St-Zip:** WINTER GARDEN, FL 34787

**Title:** DVT  
**Name:** HAMMER, JOEL  
**Address:** 599 LEXINGTON AVE  
**City-St-Zip:** NEW YORK, NY 10022

**Title:** V  
**Name:** D'ALESSANDRI, RICHARD J  
**Address:** 599 LEXINGTON AVE.  
**City-St-Zip:** NEW YORK, NY 10022

**Title:** S  
**Name:** ILARDI, ARTHUR  
**Address:** 599 LEXINGTON AVE  
**City-St-Zip:** NEW YORK, NY 10022

I hereby 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 all other like empowered.

**SIGNATURE:** BRUCE GERLANDER

DP

02/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date