

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001256

1. Entity Name
MEDITRUST GOLF GROUP, INC.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90146 009 ***558.75

Principal Place of Business
197 FIRST AVENUE
SUITE 300
NEEDHAM HEIGHTS MA 02494
US

Mailing Address
197 FIRST AVENUE
SUITE 300
NEEDHAM HEIGHTS MA 02494
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3030 LBJ FRWY.
Suite, Apt. #, etc.
1140

3. Mailing Address
P.O. Box 819087
Suite, Apt. #, etc.

City & State
DALLAS, TX
Zip
75234
Country

City & State
DALLAS, TX
Zip
75381
Country

4. FEI Number 95-4391248
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BENSON, DAVID F 197 FIRST AVE, STE #300 NEEDHAM HTS MA 02494	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BENJAMIN, MICHAEL S 197 FIRST AVE, STE #300 NEEDHAM HTS MA 02494	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO GERBER, LAURIE T 197 FIRST AVE, STE #300 NEEDHAM HTS MA 02494	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C DENERUTTU, JOHN G 197 FIRST AVE, STE #300 NEEDHAM HTS MA 02494	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO BUSHEE, MICHAEL F 197 FIRST AVE, STE #300 NEEDHAM HTS MA 02494	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. EDWARD SAUSE 3030 LBJ FRWY. DALLAS, TX 75234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S.V.P. MARY COWSET 3030 LBJ FRWY. DALLAS, TX 75234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. THOMAS HENSLEE 3030 LBJ FRWY. DALLAS, TX 75234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. JAMES HICKLEY 3030 LBJ FRWY. DALLAS, TX 75234	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: THOMAS HENSLEE 8/15/00 972-243-6191

CR2E034 (5/00)