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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90072 011 ***150.00

DOCUMENT # J42003 1. Corporation Name

T.P.C.	GOLF,	INC
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Principal Place of Business

OSPREY FL 34229 US OSPREY FL 34229 US 3. Date Incorporated or Qualifed 11/13/1986 2. Principal Place of Business 2. Determines Place of Business 2. Principal Place of Business 2. Principal Place of Business 2. Principal Place of Business 2. Do NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/13/1986 4. FEI Number 59-2743807 Not Applied For Not Applied For Suite, Apt. #, etc. 5. Certificate of Status Desired City & State Country Count	P.O. BOX 1114 OSPREY FL 342											
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9. Name and Address of Current Registered Agent SAMSON, RUSSELL H 119 PENECRINE PT DR SARASOTA FL 34231 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 82 Ziy Code 11. Pursuant to the provisions of Sections 607 0602 and 607 1508. Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered agent. It am familiar with and accept the obligatory of Section 607 0506, Florida Statutes. SIGNATURE Symmen, types or predictions don't deplay for an itse if gigurent. Politic in the provisions of predictions of the obligatory of Section 607 0506, Florida Statutes. SIGNATURE Symmen, types or predictions of registered agent. It am familiar with and accept the obligatory of Section 607 0506, Florida Statutes. SIGNATURE Symmen, types or predictions of registered agent agen	Zjp	Country	Zip	Country	, 1-		8. This corp	oration owes the curr	ent year Int	angible	_ \	
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11. Pursuant to the provisions of Sections 607,0602 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the state of Floright. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the follogible of Section 607,0609. Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS/AND-PIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS/AND-PIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME BUCK, EDWARD 12. NAME 13. THE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. NAME 12. NAME 13. THE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. THE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. STREET ADDRESS 15. SARASOTA FL 16. SARASOTA FL 17. LAS PALIMAS WAY 18. STREET ADDRESS 18. SARASOTA FL 19. DELETE 19. THE 19. DELETE 19. THE 19. Change 19. Addition 19. SARASOTA FL 19. SARASO				82	92 Street Address (P.O. Boy Number is Not Acceptable)							
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. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 1.19.07(3)(i), Fronta Statutes. I industrict the 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, with all other like empowered.

SIGNATURE

SIGNATURE REQUIS

Date

Daytime Phone

2E024 (11/98)