

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J59625

FILED  
Jan 12, 2004  
Secretary of State

Entity Name: TEE'D OFF MINITURE GOLF, INC.

## Current Principal Place of Business:

134 VIN ROSE CIRCLE  
PALM BAY, FL 32909 US

## New Principal Place of Business:

## Current Mailing Address:

134 SE VIN ROSE CIRCLE  
PALM BAY, FL 32909 US

## New Mailing Address:

FEI Number: 59-2770222

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BIRKHAUSER, WALTER  
134 VIN ROSE CIRCLE, SE  
PALM BAY, FL 32909 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BIRKHAUSER, WALTER,  
Address: 134 VIN ROSE CIR  
City-St-Zip: PALM BAY, FL

Title: VSD ( ) Delete  
Name: LARSON, PATRICIA,  
Address: 1211 MONUMENT AVE, SE  
City-St-Zip: PALM BAY, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: WALTER BIRKHAUSER

PD

01/12/2004

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

\_\_\_\_\_  
Date