

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 AM 8:57

DOCUMENT # J69953

(4)

1. Corporation Name

GARY PLAYER DESIGN COMPANY

Principal Place of Business

3300 PGA BLVD., STE 100
PALM BEACH GARDENS FL 33410

Mailing Address

3300 PGA BLVD., STE 100
PALM BEACH GARDENS FL 33410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/27/1987

3a. Date of Last Report

06/13/1994

4. FEI Number

59-2793025

Applies To

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under 1994 Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

APPLEGATE, JAMES R.
3300 PGA BLVD.,
SUITE 100
PALM BCH. GARDENS FL 33410

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Special Agent in Charge, agent, or their designee)

(If 11. New Agent, sign above designated representative)

(Date)

12. OFFICE RECIPIENT INFORMATION

13. ADDRESS OF NEW OFFICE RECIPIENT

14. NAME

PD
APPLEGATE, JAMES R.
3300 PGA BLVD. SUITE 100
PALM BCH. GARDENS FL

15. CITY, ST, ZIP

16. NAME

17. STREET ADDRESS

18. CITY, ST, ZIP

19. NAME

20. STREET ADDRESS

21. CITY, ST, ZIP

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. NAME

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4. CITY, ST, ZIP

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42. NAME

SIGNATURE:

James R. Applegate James R. Applegate

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-95

401 124 0300