

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Mar 20 1997 8:00am
Secretary of State

DOCUMENT # K11511 (8)

1. Corporation Name
BILL JOHNSON GOLF ENTERPRISES, INC.

Principal Place of Business

% GARY I. HANDIN
261 SW 6TH ST
POMPAÑO BEACH FL 33060

Mailing Address

% GARY I. HANDIN
261 SW 6TH ST
POMPAÑO BEACH FL 33060-7919



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

WILLIAM NEMSER
4130 N.W. 8TH TERRACE
POMPAÑO BEACH FL

3. Date Incorporated or Qualified

01/11/1988

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2830929

Applied For

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 s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

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 607.1508, 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 and am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent and the corporation's officer or director.

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
D
2. NAME
WILLIAM NEMSER
3. STREET ADDRESS
4130 NW 5TH TERRACE
4. CITY - ST - ZIP
POMPAÑO BEACH FL
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY - ST - ZIP
13. TITLE
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15. STREET ADDRESS
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100. CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
5. TITLE
6. NAME
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 a 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 on Block 12 or Block 13 or on an attachment with an address

SIGNATURE:

WILLIAM NEMSER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM NEMSER

3/13/97 (954) 942-8350

DATE DAYTIME PHONE

CR2E034 (9/96)