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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 06 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

DOCUMENT  1. Corporation Name	#	K11511
1. Corporation marne		

Bill Johnson Golf Enterprises, Inc.

Principal Place of Business 261 SW 6 Street

Mailing Address

Pompano Beach, Florida 33060

same

							L	<u>January 11, 1988</u>			
2. Principal Place of Business		2a	, Mailing Address				4.	FEI Number		Applied For	
		26					<u> </u>	59-2830929		Not Applicable	
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				5.	Certificate of Status Desired		.75 Additional ee Required	
City & State		28	City & State				6.	Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
Zip	Country 25	29	Zip	Coun	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
Mary F. Nutter				L						·	
1117 SW 1st Terrace Pompano Beach, Florida 33060			` <u> </u>								
			1	,							
			8	4	City		FL	85	Zip Code		
	Suite, Apt. #, etc.  City & State  Zip  9. Name  Mary F.  1117 SW	Suite, Apt. #, etc.  City & State  Zip	Suite, Apt. #, etc.  City & State  Zip  Country  25  9. Name and Address of Current Regist  Mary F. Nutter  1117 SW 1st Terrace	26	26	26     Suite, Apt. #, etc.     Suite, Apt. #, etc.   27     City & State     28     Zip	Suite, Apt. #, etc.   Suite, Apt. #, etc.	Suite, Apt. #, etc.   Suite, Apt. #, etc.   State   State	Principal Place of Business  2a, Mailing Address 2b	Principal Place of Business  2a. Mailing Address 2b.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Country 25 29 30  Name and Address of Current Registered Agent  Mary F. Nutter 1117 SW 1st Terrace Pompano Beach, Florida 33060  A. FEI Number 59-2830929  5. Certificate of Status Desired  5. Election Campaign Financing Trust Fund Contribution A  Country 8. This corporation owes or has paid the current years of the personal Property Tax due June 30. Yes  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)	

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

SIGNATURE			
			re juired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P/V/T	1.1 TITLE	☐ Change ☐ Addition
NAME	Charles N Nutter	1.2 NAME	
STREET ADDRESS	1117 SW 1st Terrace	1.3 STREET ADDRESS	
CITY-ST-ZIP	Pompano_Beach, F1. 33060	1.4 CITY - ST - ZIP	
TITLE	S DELETE	2 1 TITLE	☐ Change ☐ Addition
NAME	Mary F. Nutter	2.2 NAME	
STREET ADDRESS	1117 SW 1st Terrace	2.3 STREET ADDRESS	
CITY-ST-ZIP	Pompano Beach, F1. 33060	2. 4 City-St-ZIP	
TITLE	Dellette	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	☐ DELÉTE	41 TRLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST - ZIP	<u> </u>
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	95
STREET ADDRESS		5.3 STREET ADDRESS	J ,
CITY-ST-ZIP		5.4 CITY-ST-ZIP	5.6
TITLE	C.) DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	600002517996
STREET ADDRESS		6.3 STREET ADDRESS	-05/11/9801015003

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 112/307(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 eath; 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 chapter 607, and attachment with an address.