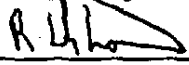


FILED

Jun 16, 2003 8:00 am
Secretary of State

06-16-2003 90137 042 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N00000005719			
1. Entity Name TAMPA BAY JUNIOR GOLF FOUNDATION, INC.			
Principal Place of Business 1100 TARPON WOODS BOULEVARD PALM HARBOR FL 34685		Mailing Address 1100 TARPON WOODS BOULEVARD PALM HARBOR FL 34685	
2. Principal Place of Business 36750 US Highway 19 N		3. Mailing Address 36750 US Highway 19 N	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Palm Harbor FL		City & State Palm Harbor FL	
Zip 34684	Country USA	Zip 34684	Country USA
6. Name and Address of Current Registered Agent LASETER, DOUG 2595 TAMPA RD., SUITE J PALM HARBOR FL 34684		7. Name and Address of New Registered Agent Name Doug - Laseter Street Address (P.O. Box Number is Not Acceptable) 36750 US Highway 19 North City Palm Harbor : FL Zip Code 34684	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 4-27-03 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WADSWORTH, BRENT 1901 VAN DYKE RD. PLAINFIELD IL 60544 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOCH, GARY 3320 W. SAN NICHOLS ST. TAMPA FL 33629 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMBLIN, STEPHEN 2415 STEEPLECHASE LN. ROSWELL GA 30076 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEIFFER, BILL 36750 US HWY. 19 NORTH, #3423 PALM HARBOR FL 34684 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LASETER, DOUG 36750 US HWY. 19 NORTH, #2117 PALM HARBOR FL 34684 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: SIGNATURE REQUIRED		DATE 4-27-03	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

90139709

☐ CHECK HERE IF MAKING CHANGES

CR2E037 (10/02)