## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007604

Entity Name: FLORIDA SINGLES GOLF ASSOCIATION, INC.

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

13567 LAKES WAY ORLANDO, FL 32828

Current Mailing Address: New Mailing Address:

13567 LAKES WAY ORLANDO, FL 32828

FEI Number: 59-3691641 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MASTALER, ROBERT

14233 PARADISE TREE DR

ORLANDO, FL 32828 US

GOUT, GERARD R

13567 LAKES WAY

ORLANDO, FL 32828 US

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: GERARD R. GOUT 01/09/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: ARROWOOD, A.J Name: GOUT, GERARD

 Name:
 Articowood, A.3
 Name:
 Good, General

 Address:
 10642 BOLAND DR
 Address:
 13567 LAKES WAY

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:
 ORLANDO, FL 32828

Title: TD () Delete Title: TD (X) Change () Addition
Name: GOUT, JERRY Name: LEUENBERGER, PHYLLIS

Address: 13567 LAKES WAY Address: 11207 TORBERT CT
City-St-Zip: ORLANDO, FL 32828 City-St-Zip: ORLANDO, FL 32837

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

 Name:
 DICKERSON, CAROLYN
 Name:
 HAMMOND, JUDY

 Address:
 1500 LUCKIE PENNY WAY
 Address:
 5095 FAYANN STR

 City-St-Zip:
 APOPKA, FL 32712
 City-St-Zip:
 ORLANDO, FL 32812

 Name:
 DUFFEY, MARCIA
 Name:

 Address:
 937 BIRMINGHAM COURT., #203
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERARD R GOUT PD 01/09/2007