

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005001

FILED
Apr 27, 2006
Secretary of State

Entity Name: TERRY-JO MYERS YOUTH GOLF FOUNDATION, INC.

Current Principal Place of Business:

1520 ROYAL PALM SQUARE BOULEVARD
SUITE 320
FORT MYERS, FL 33919

New Principal Place of Business:

1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919 US

Current Mailing Address:

1520 ROYAL PALM SQUARE BOULEVARD
SUITE 320
FORT MYERS, FL 33919

New Mailing Address:

1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919 US

FEI Number: 20-1150005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KYLE, KEVIN A
1520 ROYAL PALM SQUARE BOULEVARD
SUITE 320
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

KYLE, KEVIN A
1380 ROYAL PALM SQUARE BOULEVARD
FORT MYERS, FL 33919 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:

04/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MYERS, TERRY-JO
Address: 11592 TIMBERLINE CIRCLE
City-St-Zip: FORT MYERS, FL 33912 US

Title: DT () Delete
Name: FISHER, BARRY
Address: 13690 BRYNWOOD LANE
City-St-Zip: FORT MYERS, FL 33912 US

Title: DS (X) Delete
Name: KYLE, KEVIN A
Address: 3309 HIBISCUS DRIVE
City-St-Zip: FORT MYERS, FL 33912 US

Title: D (X) Delete
Name: CRABB, MARK
Address: 11092 LAKELAND CIRCLE
City-St-Zip: FORT MYERS, FL 33913 US

Title: D (X) Delete
Name: SHAW, TIM
Address: 15617 FIDDLESTICKS BLVD.
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: FISHER, BARRY
Address: 13690 BRYNWOOD LANE
City-St-Zip: FORT MYERS, FL 33912 US

Title: DS (X) Change () Addition
Name: KYLE, KEVIN A
Address: 3309 HIBISCUS DRIVE
City-St-Zip: FORT MYERS, FL 33912 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: KEVIN A. KYLE

DS

04/27/2006

Electronic Signature of Signing Officer or Director

Date