2007 NOT-FOR-PROFIT CORPORATION

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ANNUAL REPORT				_ red	Feb 09, 2007 8:00 am		
DOCUMENT # N0400008630 1. Entity Name THE COUNTY OF COLUMN AND THE COLUMN AND T			Sec	retary of Sta	te		
	RIT OF GOLF FOUNDATION	HINC.		02-0	9-2007 90024 032 ****61.2	25	
Principal Plac P.O. BOX 69 ORLANDO, F		Mailing Address P.O. BOX 690096 ORLANDO, FL 32869-00	96 US				
	lace of Business - No P.O. Box #	3. Mailing Address	ions Cate F	34),			
<u> </u>	#, etc.	Suite, Apt. #, etc.	TONE SOLF I		ig-NP CR2E037 (12/06)	
	pions bates FL	Champions (ate, FL	4. FEI Number 52-205597	5	Applied For Not Applicable	
338°	76 USA	33896	u5A	5. Certificate of Sta	atus Desired S8.75 A Fee Requiress of New Registered Agent		
	6. Name and Address of Current F	registered Agent	Name 11	, rame and Addi	I tem Vediarese videur		
MADONNA, WILLIAM J 7458 SOMERSET SHOES COURT			Name Illiam T. Madanna Street Adgress (P.A. Box Number is Not Acceptable) 5351 RIVE POLOTE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
ORLANDO), FL 32819			- SIVII MU			
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 Signature, typed or printed interest agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
SIGNATURE	Signature, typed or printed refing of registered agent a	nd tride if applicable. (NOTE: R	legistered Agent signature rec	quired when reinstating)	2/2/0 DATE	7_	
SIGNATURE	Signifiure, typed or printed remotor registered egent a Filling Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Cor	aign Financing	\$5.00 May Be Added to Fees	Make check payable Florida Department of	State	
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STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.