

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008630

FILED
Jan 08, 2008
Secretary of State

Entity Name: THE SPIRIT OF GOLF FOUNDATION INC.

Current Principal Place of Business:

835 1 RIVERDALE LAEN
CHAMPIONS GATES, FL 33896 US

New Principal Place of Business:

8351 RIVERDALE LANE
CHAMPIONSGATE, FL 33896 US

Current Mailing Address:

835 1 RIVERDALE LAEN
CHAMPIONS GATES, FL 33896 US

New Mailing Address:

8351 RIVERDALE LANE
CHAMPIONSGATE, FL 33896 US

FEI Number: 52-2055975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADONNA, WILLIAM J
8351 RIVERDALE LANE
CHAMPIONS GATES, FL 33896 US

Name and Address of New Registered Agent:

MADONNA, WILLIAM J
8351 RIVERDALE LANE
CHAMPIONSGATE, FL 33896 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:

01/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CAREY, WILLIAM R
Address: 8351 RIVERDALE LANE
City-St-Zip: CHAMPIONS GATES, FL 33896 US

Title: D () Delete
Name: MADONNA, WILLIAM J
Address: 8351 RIVERDALE LANE
City-St-Zip: CHAMPIONS GATES, FL 33896 US

Title: D () Delete
Name: CALVERT, HORACE
Address: 8351 RIVERDALE LANE
City-St-Zip: CHAMPIONS GATES, FL 33896 US

Title: D (X) Delete
Name: MONTAGUE, JOHN
Address: 8351 RIVERDALE LANE
City-St-Zip: CHAMPIONS GATES, FL 33896 US

Title: D (X) Delete
Name: KENNDY, JOHN JR
Address: P.O. BOX 690096
City-St-Zip: ORLANDO, FL 328690096

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CAREY, WILLIAM R
Address: 8351 RIVERDALE LANE
City-St-Zip: CHAMPIONSGATE, FL 33896 US

Title: D (X) Change () Addition
Name: MADONNA, WILLIAM J
Address: 8351 RIVERDALE LANE
City-St-Zip: CHAMPIONSGATE, FL 33896 US

Title: D (X) Change () Addition
Name: CALVERT, HORACE A
Address: 8351 RIVERDALE LANE
City-St-Zip: CHAMPIONS GATE, FL 33896 US

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 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: WILLIAM J. MADONNA

D

01/08/2008

Electronic Signature of Signing Officer or Director

Date