2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002951

FILED Apr 11, 2007 Secretary of State

Entity Name: SARASOTA MENS GOLF CLUB INC. **Current Principal Place of Business: New Principal Place of Business:** 8369 WINGATE DRIVE #2122 15508 LEMON FISH DRIVE SARASOTA, FL 34238 LAKEWOOD RANCH, FL 34202 **Current Mailing Address: New Mailing Address:** 8369 WINGATE DRIVE #2122 15508 LEMON FISH DRIVE SARASOTA, FL 34238 LAKEWOOD RANCH, FL 34202 FEI Number: 20-4530764 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UNITED STATES CORPORATION AGENTS, INC. 1111 LINCOLN RD SUITE 400 MIAMI BEACH, FL 33139 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition ZIAMO, JASON ZIARNO, JASON Name: Name: 2000 WEBBER ST Address: 15508 LEMON FISH DRIVE Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: LAKEWOOD RANCH, FL 34202 Title: () Delete Title: () Change () Addition SHOE, RON Name: Name: Address: 9540 HIGH GATE DR., STE, 1425 Address: City-St-Zip: SARASOTA, FL 32238 City-St-Zip: Title: () Delete Title: () Change () Addition GUNNEEN, PATRICK Name: Name: 2000 WEBBER ST Address: Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BENSON, BRAD Name: Address: 446 S. TAMIAMI TRAIL Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: () Change (X) Addition BRYAN, FAZIO Name: Name: 3625 BEE RIDGE ROAD Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34233 FL

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: JASON ZIARNO D 04/11/2007