2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# N08000002791

Entity Name: BOO WEEKLEY CHARITY GOLF, INC.

Current Principal Place of Business:

5652 NICKLAUS LANE
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

5652 NICKLAUS LANE
MILTON, FL 32570

New Mailing Address:

FEI Number: 26-2521318 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PACE, JEREMY
5652 NICKLAUS LANE
MILTON, FL 32570 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: WEEKLEY, THOMAS B
Address: 5652 NICKLAUS LANE
City-St-Zip: MILTON, FL 32570

Title: D ( ) Delete
Name: WEEKLEY, KARYN
Address: 5652 NICKLAUS LANE
City-St-Zip: MILTON, FL 32570

Title: D ( ) Delete
Name: PACE, JEREMY
Address: 5652 NICKLAUS LANE
City-St-Zip: MILTON, FL 32570

Title: D ( ) Delete
Name: INNES, RALPH
Address: 90 INNES DRIVE
City-St-Zip: POPLAR BLUFF, MO 63901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WEEKLEY, THOMAS B
Address: 2555 NEW YORK ST.
City-St-Zip: JAY, FL 32565

Title: VD (X) Change ( ) Addition
Name: WEEKLEY, KARYN H
Address: 2555 NEW YORK ST.
City-St-Zip: JAY, FL 32565

Title: TD (X) Change ( ) Addition
Name: PACE, JEREMY
Address: 5652 NICKLAUS LANE
City-St-Zip: MILTON, FL 32570

Title: SD (X) Change ( ) Addition
Name: INNES, RALPH L
Address: 90 INNES DRIVE
City-St-Zip: POPLAR BLUFF, MO 63901

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: JEREMY PACE TREA 01/06/2009

Electronic Signature of Signing Officer or Director — Date