## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N12808

FILED Jun 28, 2005 Secretary of State

Entity Name: SOUTH FLORIDA GOLF FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

MIAMI, FL 33178 US

Current Mailing Address: New Mailing Address:

4400 NW 87 AVE 4400 NW 87 AVE

MIAMI, FL 33178 US LODGE 8 MIAMI, FL 33178 US

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FEI Number: 59-2666056 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WATTS-FITZGERALD, ABIGAIL C C/O HUNTON & WILLIAMS, BARCLAYS FINANCIAL 1111 BRICKELL AVENUE, SUITE 2500 MIAMI, FL 33131 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:

Clastical Company of Department Asset

Electronic Signature of Registered Agent

Date
ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition

 Title:
 PD () Delete
 Title:
 PD (X) Change (

 Name:
 DAVIS, ROBERT N.
 Name:
 SHAFER, ROBERT J

 Address:
 8 MORGAN CT.
 Address:
 4206 LAGUNA ST.

City-St-Zip: MORRISTOWN, NJ 07960 City-St-Zip: CORAL GABLES, FL 33146

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name: SHAFER, ROBERT Name: MAS CANOSA, RAMON

 Address:
 4206 LAGUNA ST.
 Address:
 800 DOUGLAS RD,, NORTH TOWER #900

 City-St-Zip:
 CORAL GABLES, FL 33146
 City-St-Zip:
 CORAL GABLES, FL 33134

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STEINBAUER, JOHN
 Name:

 Address:
 3785 NW 82ND AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

Title: T ( ) Delete Title: T (X) Change ( ) Addition

Name: PAIGE, JOEL Name: WORLEY, J. HAYES JR.

Address: 9735 NW 52ND STREET, #101 Address: 9500 S. DADELAND BLVD., 2ND FLOOR

City-St-Zip: MIAMI, FL 33178 City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT J. SHAFER PD 06/28/2005