

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002782

**FILED**  
**Aug 03, 2004**  
**Secretary of State****Entity Name:** THE FLORIDA CHAPTER OF THE NATIONAL GOLF COURSE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**556 TETON ST  
LAKE MARY, FL 32746**New Principal Place of Business:**2995 REMINGTON BLVD  
KISSIMMEE, FL 34744**Current Mailing Address:**P. O. BOX 951422  
LAKE MARY, FL 327951422 US**New Mailing Address:**2995 REMINGTON BLVD  
KISSIMMEE, FL 34744**FEI Number:** 59-3475661**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FARROW, MARK  
3958 CORVETA COURT  
ORLANDO, FL 32837 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:** VD ( ) Delete  
**Name:** FINCH, RAYMOND JR  
**Address:** 2100 EMERALD DUNES DR  
**City-St-Zip:** WEST PALM BEACH, FL 33411**Title:** D ( ) Delete  
**Name:** FARROW, MARK  
**Address:** 2995 RIMINGTON BLVD  
**City-St-Zip:** KISSIMMEE, FL 34744**Title:** D ( ) Delete  
**Name:** STINE, BILL  
**Address:** 2995 RIMINGTON BLVD  
**City-St-Zip:** KISSIMMEE, FL 34744**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****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 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: MARK FARROW

D

08/03/2004

Electronic Signature of Signing Officer or Director

Date