

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000000188

FILED
Apr 22, 2002 8:00 AM
Secretary of State

Entity Name: FLORIDA ADAPTIVE GOLF, INC.

Current Principal Place of Business:

5085 KINGSLEY ROAD
NORTH PORT, FL 34287

New Principal Place of Business:

3695 BREEZEMONT DRIVE
SARASOTA, FL 34232

Current Mailing Address:

5085 KINGSLEY ROAD
NORTH PORT, FL 34287

New Mailing Address:

3695 BREEZEMONT DRIVE
SARASOTA, FL 34232

FEI Number: 65-0807961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, DUNCAN A
5085 KINGSLEY ROAD
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

CLARK, DUNCAN A PSTD
5085 KINGSLEY ROAD
NORTH PORT, FL 34287 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: DUNCAN A. CLARK

04/22/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CLARK, DUNCAN A
Address: 5085 KINGSLEY ROAD
City-St-Zip: NORTH PORT, FL 34287

Title: D () Delete
Name: GOODLANDER, PAUL B
Address: 5085 KINGSLEY ROAD
City-St-Zip: NORTH PORT, FL 34287

Title: D () Delete
Name: GOODLANDER, ROSANNE M
Address: 5085 KINGSLEY ROAD
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GOODLANDER, PAUL B
Address: 3695 BREEZEMONT DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Change () Addition
Name: GOODLANDER, ROSANNE M
Address: 3695 BREEZEMONT DRIVE
City-St-Zip: SRASOTA, FL 34232

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: PAUL B. GOODLANDER

D

04/22/2002

Electronic Signature of Signing Officer or Director

Date