

FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90053 005 ****70.00

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N99000000903 1. Entity Name JUNIOR GOLF AND ACADEMICS OF AMERICA, INC.		90133796	
Principal Place of Business 5850 BELEVEDERE RD., #200 WEST PALM BEACH, FL 33413		Mailing Address 5850 BELEVEDERE RD., #200 WEST PALM BEACH, FL 33413	
2. Principal Place of Business 700 South Dixie Hwy Suite, Apt. #, etc. SUITE 101 City & State WEST PALM BEACH, FL Zip 33401 Country PBC		3. Mailing Address 700 South Dixie Hwy Suite, Apt. #, etc. SUITE 101 City & State WEST PALM BEACH, FL Zip 33401 Country PBC	
4. FEI Number 65-0905854		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additions! Fee Required		☒ CHECK HERE IF MAKING CHANGES	
6. Name and Address of Current Registered Agent REYNOLDS, CHARLES E 2481 VILLAGE BLVD., #205 WEST PALM BEACH, FL 33409		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of, registered agent. SIGNATURE DATE _____ (NOTE: Registered Agent's signature required when resigning)			
FILE NOW! FEE IS \$81.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP CD REYNOLDS, CHARLES 2481 VILLAGE BLVD., #205 WEST PALM BEACH, FL 33409	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D JOSE R. MAEMALEJO 3137 S.W. 17TH ST. MIAMI, FL 33145	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD MILLER, MARIA P 107 WILLINGTON M WEST PALM BEACH, FL 33449	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD DAVIS, PATRICIA 1572 W. 10TH STREET RIVIERA BEACH, FL 33404	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD VAN BUCKLE, GREG 7798 S.E. KINGS WAY STREET HOBE SOUND, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D FRONIO, BOB 816 9TH AVE PALM BEACH GARDENS, FL 33403	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D DORFMAN, MARK 10404 CARMAN LA ROYAL PALM BEACH, FL 33411	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied in this filing does pertain only to the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 517, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other the empowered.			
SIGNATURE: DATE 5/5/03		501-833-1925	

CR20037 (10/02)