2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007
Secretary of State

DOCUMENT# N99000005162

Entity Name: BABE AND GEORGE ZAHARIAS GOLF FOUNDATION, INC.

Current Principal Place of Business:

1423 HILTON PLACE
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

1423 HILTON PLACE
TAMPA, FL 33604

New Mailing Address:

FEI Number: 59-3598589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAW, HAROLD G
1423 HILTON PLACE
TAMPA, FL 33604 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: SHAW, HAROLD G
Address: 3107 W HORATIO ST, UNIT #14
City-St-Zip: TAMPA, FL 33609 US

Title: D ( ) Delete
Name: SCHROEDER, VERNON
Address: 6408 JULIE ST
City-St-Zip: TAMPA, FL 33610 US

Title: D ( ) Delete
Name: BEATTY, BRUCE
Address: 7670 CENTRAL PARK CIRCLE
City-St-Zip: TAMPA, FL 33637 US

Title: D ( ) Delete
Name: DELGADO, HECTOR
Address: 4820 N. CLARK AVE.
City-St-Zip: TAMPA, FL 33614 US

Title: D ( ) Delete
Name: VOGT, JOHN
Address: 442 W. KENNEDY BLVD.
City-St-Zip: TAMPA, FL 33606 US

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:

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 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: VERNON T. SCHROEDER D 04/26/2007

Electronic Signature of Signing Officer or Director — Date