


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000100114 1. Entity Name NATURAL GOLF SOLUTIONS, INC.	
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Principal Place of Business 21460 LAGUNA DRIVE BOCA RATON, FL 33433	Mailing Address 21460 LAGUNA DRIVE BOCA RATON, FL 33433
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02172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1051659	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C/O WORLDWIDE CORPORATE SERVICES, INC.
 2780 EAST OAKLAND PARK BLVD.
 FORT LAUDERDALE, FL 33308

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8. The above named entity submits this statement for the purpose of charging 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, MANCIL 21460 LAGUNA DR BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LYNCH, WAYNE 21460 LAGUNA DR BOCA RATON, FL 33433
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE LYNCH Wayne Lynch SECRETRES 4/26/05 1-877-256-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #