

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000083386

FILED  
Nov 03, 2006  
Secretary of State

Entity Name: NORMAN GOLF MARKETING INC.

## Current Principal Place of Business:

4672 KERNAN MILL LANE EAST  
JACKSONVILLE, FL 32224

## New Principal Place of Business:

1215 14TH AVE. NORTH  
JACKSONVILLE BEACH, FL 32250

## Current Mailing Address:

4672 KERNAN MILL LANE EAST  
JACKSONVILLE, FL 32224

## New Mailing Address:

1215 14TH AVE. NORTH  
JACKSONVILLE BEACH, FL 32250

FEI Number: 04-3682346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORMAN, TRAVIS  
4672 KERNAN MILL LANE EAST  
JACKSONVILLE, FL 32224 US

## Name and Address of New Registered Agent:

NORMAN, TRAVIS  
1215 14TH AVE. NORTH  
JACKSONVILLE BEACH, FL 32250 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: TRAVIS NORMAN

11/03/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NORMAN, TRAVIS  
Address: 4672 KERNAN MILL LANE EAST  
City-St-Zip: JACKSONVILLE, FL 32224

Title: VPD ( ) Delete  
Name: TOWERY, AUSTIN  
Address: 4672 KERNAN MILL LANE EAST  
City-St-Zip: JACKSONVILLE, FL 32224

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NORMAN, TRAVIS  
Address: 1215 14TH AVE. NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VPD (X) Change ( ) Addition  
Name: TOWERY, AUSTIN  
Address: 1215 14TH AVE. NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRAVIS NORMAN

PD

11/03/2006

Electronic Signature of Signing Officer or Director

Date