2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000092315

OLIVER, FOSTER

8700 SOUTHSIDE BLVD.

JACKSONVILLE, FL 32256

Name:

Address:

City-St-Zip:

Entity Name: GOLF OPERATORS OF NORTH FLORIDA, INC

FILED May 01, 2006 Secretary of State

	Principal Plac	e of Business:	New Principal Place of Business:		
	THSIDE DR SO NVILLE, FL 32				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	THSIDE DR S0 NVILLE, FL 32				
FEI Number	r: 59-3746082	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
NEPTUNE The above	D STREET ST E BEACH, FL	32266 US	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU					
	Electro				
		nic Signature of Registered A	gent	Date	
		nic Signature of Registered A 93(2)(b), F.S., the corporation did ng Trust Fund Contribution ().	-	Date	
Election Ca		93(2)(b), F.S., the corporation did ng Trust Fund Contribution ().	not receive the prior notice.	Date ES TO OFFICERS AND DIRECTOR	
Election Ca	impaign Financir IS AND DIREC P (MAK, PHILLIP	93(2)(b), F.S., the corporation did ng Trust Fund Contribution (). CTORS:) Delete ABLO ROAD SOUTH, STE. 148	not receive the prior notice.		
Election Ca OFFICER Title: Name: Address:	mpaign Financir S AND DIRECT P (MAK, PHILLIP 1650-7 SAN P. JACKSONVILL ST (CHUNG LI, PA	93(2)(b), F.S., the corporation did ng Trust Fund Contribution (). CTORS:) Delete ABLO ROAD SOUTH, STE. 148 .E, FL 32224) Delete UL S CKSHIRE ROAD	not receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR	
Election Ca OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	mpaign Financir S AND DIRECT P (MAK, PHILLIP 1650-7 SAN P. JACKSONVILL ST (CHUNG LI, PA 9031 WARWIG JACKSONVILL V (CATLETT, CH/	93(2)(b), F.S., the corporation did no Trust Fund Contribution (). CTORS:) Delete ABLO ROAD SOUTH, STE. 148 LE, FL 32224) Delete UL S CKSHIRE ROAD LE, FL 32257) Delete ARLES T WOOD FOREST BLVD.	not receive the prior notice. ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTOR () Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PHILLIP MAK P 05/01/2006