

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 11, 2008
Secretary of State**

DOCUMENT# P01000116632

Entity Name: PROPLUS GOLF SERVICES, INC.

Current Principal Place of Business:

149 COUNTY LINE RD E
BOWLING GREEN, FL 33834

New Principal Place of Business:

Current Mailing Address:

PO BOX 337
BOWLING GREEN, FL 33834

New Mailing Address:

FEI Number: 26-0004390 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYLE, MARTHA B
65700 OVERSEAS HWY
LONG KEY, FL 33001 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: P () Delete
Name: LYLE, MARTHA B
Address: P O BOX 955
City-St-Zip: LONG KEY, FL 33001

Title: VP () Delete
Name: LYLE, CHRISTINA C
Address: 610 TURNBERRY CT
City-St-Zip: WINTER HAVEN, FL 33884

Title: ST () Delete
Name: LYLE-STENICO, LESLEY A
Address: 317 W MAIN ST
City-St-Zip: BOWLING GREEN, FL 33834

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DRISKELL, RICKEY T
Address: 306 RIVERSIDE DR.
City-St-Zip: WAUCHULA, FL 33873

Title: ST (X) Change () Addition
Name: LYLE, CHRISTINA C
Address: 610 TURNBERRY CT
City-St-Zip: WINTER HAVEN, FL 33884

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHA B LYLE

P

04/11/2008

Electronic Signature of Signing Officer or Director

_____ Date