2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000025779

Entity Name: RAZOR GOLF, INC.

Address:

City-St-Zip:

5745 SW 75TH STREET

GAINESVILLE, FL 32608

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
13660 WRIGHT CIRCLE TAMPA, FL 33626			12708 DUPONT CIRO TAMPA, FL 33626	12708 DUPONT CIRCLE TAMPA, FL 33626	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
13660 WRIGHT CIRCLE TAMPA, FL 33626			12708 DUPONT CIRCLE TAMPA, FL 33626		
FEI Number	: 01-0620096	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
	SEORGE T SHING GULL L RBOR, FL 34				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
Fl4: 0		nic Signature of Registered Ag	ent	Date	
Election Cal	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VANDIVER, M 9517 ALVERN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C (SMITH, BARR 315 PLANT AV TAMPA, FL 33	E., SUITE A	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CEOD (BAKER, GEOI 145 LAUGHIN PALM HARBO	G GULL LN.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	PD (REGER, JOHN) Delete NJR	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: MICHAEL R. VANDIVER SEC. 04/28/2006