

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045098

FILED
Jul 01, 2004
Secretary of State

Entity Name: LUMBRA, ROBINSON & ASSOCIATES GOLF, INC.

Current Principal Place of Business:

2250 LUCIEN WAY, #301
MAITLAND, FL 32751

New Principal Place of Business:

498 S LAKE DESTINY RD
ORLANDO, FL 32810

Current Mailing Address:

2250 LUCIEN WAY, #301
MAITLAND, FL 32751

New Mailing Address:

498 S LAKE DESTINY RD
ORLANDO, FL 32810

FEI Number: 27-0016972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUMBRA, JAMES R SR.
2250 LUCIEN WAY, #301
MAITLAND, FL 32751

Name and Address of New Registered Agent:

LUMBRA, JAMES R SR.
498 S LAKE DESTINY RD
ORLANDO, FL 32810

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: _____

07/01/2004

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: D () Delete
Name: LUMBRA, JAMES R SR.
Address: 2250 LUCIEN WAY, #301
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: ROBINSON, KENNETH D
Address: 2250 LUCIEN WAY, #301
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: SHELDON, DORIS K
Address: 2250 LUCIEN WAY, #301
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LUMBRA, JAMES R SR.
Address: 498 S LAKE DESTINY RD
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change () Addition
Name: ROBINSON, KENNETH D
Address: 498 S LAKE DESTINY RD
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Change () Addition
Name: SHELDON, DORIS K
Address: 498 S LAKE DESTINY RD
City-St-Zip: ORLANDO, FL 32810

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES R LUMBRA, SR

D

07/01/2004

Electronic Signature of Signing Officer or Director

Date