2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# P03000015809

Entity Name: RIP TIDE GOLF, INC.

Current Principal Place of Business:

10701 KNOLLSWAY CT
TAMPA, FL 33625

New Principal Place of Business:

P. O. BOX 9688
ST. PETERSBURG, FL 33740

Current Mailing Address:

10701 KNOLLSWAY CT
TAMPA, FL 33625

New Mailing Address:

P. O. BOX 9688
ST. PETERSBURG, FL 33740

FEI Number: 02-0675551 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, JERRY L
10701 KNOLLSWAY CT
TAMPA, FL 33625

Name and Address of New Registered Agent:

COOPERMAN, PAUL B
11750 7TH STREET EAST
TREASURE ISLAND, FL 33706

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: PAUL B COOPERMAN 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: P ( ) Delete
Name: WILLIAMS, JERRY L
Address: 10701 KNOLLSWAY CT
City-St-Zip: TAMPA, FL 33625

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COOPERMAN, PAUL B
Address: 11750 7TH STREET EAST
City-St-Zip: TREASURE ISLAND, FL 33706

Title: V ( ) Change (X) Addition
Name: WILLIAMS, JULIE
Address: 10701 KNOLLSWAY CT
City-St-Zip: TAMPA, FL 33625

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: PAUL B COOPERMAN P 07/01/2004
Electronic Signature of Signing Officer or Director Date