

## **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000019771

Entity Name: GOLF YOUR WAY, INC.

**FILED**  
**Jun 21, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

16301 PHIL RITSON WAY  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

**Current Mailing Address:**

294 BELHAVEN FALLS DRIVE  
OCOE, FL 34761 US

**New Mailing Address:**

FEI Number: 11-3678305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RITSON, MICHELLE  
294 BELHAVEN FALLS DRIVE  
OCOE, FL 34761 US

**Name and Address of New Registered Agent:**

RITSON, PHILIP V  
294 BELHAVEN FALLS DRIVE  
OCOE, FL 34761 US

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: PHILIP V. RITSON

06/21/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: RITSON, MICHELLE  
Address: 294 BELHAVEN FALLS DRIVE  
City-St-Zip: OCOE, FL 34761

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: RITSON, PHILIP V  
Address: 294 BELHAVEN FALLS DRIVE  
City-St-Zip: OCOE, FL 34761

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.

SIGNATURE: PHILIP V. RITSON

PRES

06/21/2006

Electronic Signature of Signing Officer or Director

Date