2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2005
Secretary of State

DOCUMENT# P03000094380

Entity Name: THE GOLF ZONE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

10701 KNOLLSWAY CT
TAMPA, FL 33625

New Principal Place of Business:

25648 RISEN STAR DR
WESLEY CHAPEL, FL 33544

Current Mailing Address:

10701 KNOLLSWAY CT
TAMPA, FL 33625

New Mailing Address:

25648 RISEN STAR DR
WESLEY CHAPEL, FL 33544

FEI Number: 02-2308110 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, JULIE A
10701 KNOLLSWAY CT
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

WILLIAMS, JULIE A
25648 RISEN STAR DR
WESLEY CHAPEL, FL 33544 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: JULIE WILLIAMS 08/09/2005
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: CEO ( ) Delete
Name: WILLIAMS, JULIE A
Address: 10701 KNOLLSWAY CT
City-St-Zip: TAMPA, FL 33625

Title: PRES ( ) Delete
Name: MITCHELL, PATRICK
Address: 25648 RISEN STAR DR
City-St-Zip: WESLEY CHAPEL, FL 33544

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: WILLIAMS, JULIE A
Address: 7809 OUTERBRIDGE ST
City-St-Zip: WESLEY CHAPEL, FL 33544

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

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: JULIE WILLIAMS CEO 08/09/2005
Electronic Signature of Signing Officer or Director Date