2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120289

intity Name: TAMPA BAY PUTTING GREENS INC

14084 STERLING POINT DR

GAINSVILLE, VA 20155

Address: City-St-Zip: FILED Jun 02, 2004 Secretary of State

Entity Nai	Me: TAMPA BA	Y PUTTING GREENS INC			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10740 EVE TRINITY, F	ENINGWOOD C FL 34655	Т			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
10740 EVE TRINITY, F	ENINGWOOD C FL 34655	Т			
FEI Number	:	FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
16017 NO STE 129	JSINESS ACCO RTH FLORIDA / 33549 US	UNTING SERVICES AVE			
	e named entity su e of Florida.	ibmits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			nt	Date	
		2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () [DELNEGRO, PAI 10740 EVENING TRINITY, FL 346	WOOD CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ()[OSTENSEN, GEO 14084 STERLING GAINSVILLE, VA	POINT DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SEC () [OSTENSEN, MAR	Delete RGARET	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PAMELA DELNEGRO P 06/02/2004