

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133271

FILED
Apr 21, 2006
Secretary of State

Entity Name: MASTERFIT GOLF TEACHING AND FITTING ACADEMY, INC.

Current Principal Place of Business:

4128 S THIRD ST
JACKSONVILLE BCH, FL 32250

New Principal Place of Business:

14055 PHILIPS HWY
JACKSONVILLE, FL 32256

Current Mailing Address:

4128 S THIRD ST
JACKSONVILLE BCH, FL 32250

New Mailing Address:

14055 PHILIPS HWY
JACKSONVILLE, FL 32256

FEI Number: 32-0100686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANZA, PHIL
161 N COVE DR
PONTE VEDRA BCH, FL 32082 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LANZA, PHIL
Address: 161 N COVE DR
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: V () Delete
Name: SCHROEDER, JOHN
Address: 817 BROOKSTONE CT
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: PHIL R LANZA

PRES

04/21/2006

Electronic Signature of Signing Officer or Director

Date