


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Mar 16, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P05000123461</b>	
1. Entity Name <b>B C GOLF INSTRUCTION ,INC.</b>	

Principal Place of Business <b>9500 S. OCEAN DRIVE #1403 JENSEN BEACH, FL 34957 US</b>	Mailing Address <b>9500 S. OCEAN DRIVE #1403 JENSEN BEACH, FL 34957 US</b>
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03132007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-3436293</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

<b>CIMINO, BUTCH 9500 S. OCEAN DRIVE #1403 JENSEN BEACH, FL 34957</b>
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PVST CIMINO, BUTCH 9500 S. OCEAN DRIVE #1403 JENSEN BEACH, FL 34957</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D CIMINO, BUTCH 9500 S. OCEAN DRIVE #1403 JENSEN BEACH, FL 34957</b>
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03/27/07-80019-010 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Butch Cimino*