

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000017514

FILED
Feb 12, 2007
Secretary of State

Entity Name: PLAY MY GOLF COURSE INC.

Current Principal Place of Business:

12321 WOODLANDS CIRCLE
DADE CITY, FL 33525

New Principal Place of Business:

Current Mailing Address:

12321 WOODLANDS CIRCLE
DADE CITY, FL 33525

New Mailing Address:

FEI Number: 22-3921399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PD () Delete
Name: HOGABOAM, DEAN
Address: 12321 WOODLANDS CIRCLE
City-St-Zip: DADE CITY, FL 33525

Title: TD () Delete
Name: HOGABOAM, DEREK
Address: 12321 WOODLANDS CIRCLE
City-St-Zip: DADE CITY, FL 33525

Title: SD () Delete
Name: HOGABOAM, WAYNE
Address: 12321 WOODLANDS CIRCLE
City-St-Zip: DADE CITY, FL 33525

Title: VD () Delete
Name: OWENS, PATRICIA
Address: 12321 WOODLANDS CIRCLE
City-St-Zip: DADE CITY, FL 33525

Title: VD () Delete
Name: COSTIN, KEVIN
Address: 12321 WOODLANDS CIRCLE
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DEAN HOGABOAM

PD

02/12/2007

Electronic Signature of Signing Officer or Director

Date