

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068112

Entity Name: A+M GOLF SERVICES, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

6103 MANCHESTER PLACE
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

6103 MANCHESTER PLACE
NAPLES, FL 34110

New Mailing Address:

FEI Number: 26-0323951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUSSIER, KAREN
6103 MANCHESTER PLACE
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

LUSSIER, KAREN PRES
6103 MANCHESTER PLACE
NAPLES, FL 34110 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: KAREN LUSSIER

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LUSSIER, KAREN
Address: 6103 MANCHESTER PLACE
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: BALDING, ALLAN G
Address: 17041 GOLFSIDE CIRCLE #1001
City-St-Zip: FT. MYERS, FL 33908

Title: D (X) Delete
Name: METZGER, MARK
Address: 8212 IBIS COVE CIRCLE
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LUSSIER, KAREN PRES
Address: 6103 MANCHESTER PLACE
City-St-Zip: NAPLES, FL 34110

Title: D (X) Change () Addition
Name: MARK, METZGER VP
Address: 8212 IBIS COVE CIRCLE
City-St-Zip: NAPLES, FL 34119

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

I hereby certify that the information supplied with this filing does not qualify 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: KAREN LUSSIER

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date