

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17030

FILED
Apr 27, 2004
Secretary of State

Entity Name: GOLF USA, INC.

Current Principal Place of Business:

3705 W. MEMORIAL
SUITE 801
OKLAHOMA CITY, OK 73134 US

New Principal Place of Business:

Current Mailing Address:

3705 W. MEMORIAL
SUITE 801
OKLAHOMA CITY, OK 73134 US

New Mailing Address:

FEI Number: 73-1275602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS LEGAL SERVICES
1333 NORTH DUVAL ST
TALLAHASSEE, FL 32302 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: ANTHONY, TOM
Address: 3705 W MEMORIAL
City-St-Zip: OKLAHOMA CITY, OK 73134

Title: ST () Delete
Name: MCTIERNAN, PATRICK D.
Address: 3705 W MEMORIAL
City-St-Zip: OAKLAHOMA CITY, OK 73134

Title: D () Delete
Name: ANTHONY, ROBERT
Address: 3604 N MCKINLEY
City-St-Zip: OKLAHOMA CITY, OK 73112

Title: D () Delete
Name: LAKE, STEPHEN
Address: 241 JAMIE WHITTEN BLVD
City-St-Zip: SALTILLO, MS 38866

Title: D () Delete
Name: HILL, STEVE
Address: 900 CIRCLE 75 PKWY, STE 1600
City-St-Zip: ATLANTA, GA 30339

Title: CEOD (X) Delete
Name: HENDERSON, MIKE
Address: 3705 W MEMORIAL
City-St-Zip: OKLAHOMA CITY, OK 73134

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
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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 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.

SIGNATURE: PATRICK MCTIERNAN

SECR

04/27/2004

Electronic Signature of Signing Officer or Director

_____ Date