2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17030

COLETION INC

FILED Mar 14, 2007 Secretary of State

Entity Nai	me: GOLF USA, II	NC.				
Current P	rincipal Place of I	Business:	New Prince	ipal Place of	f Business:	
3705 W. M SUITE 801 OKLAHON	1EMORIAL I MA CITY, OK 7313	4 US				
Current M	lailing Address:		New Maili	ng Address:		
SUITE 801	MEMORIAL MA CITY, OK 7313	4 US				
FEI Number	: 73-1275602 FI	El Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of Curr	ent Registered Agent:	Name and	Address of	New Registered Agent:	
1203 GOV TALLAHAS The above	S FILINGS INCORF ERNORS SQUAR SSEE, FL 32301 named entity subr	E BLVD STE 101 US	ourpose of changing i	ts registered	office or registered agent, or bot	h,
SIGNATU						
SIGNATOR		ignature of Registered Age	ent		Date	_
Election Car	mpaign Financing Tru	st Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () Dele ANTHONY, TOM 3705 W MEMORIAL OKLAHOMA CITY, C		Title: Name: Address: City-St-Zip:	ANTHONY, TO 3705 W MEM		
Title: Name: Address: City-St-Zip:	ST () Dele BOWEN, NICOLE 3705 W. MEMORIAL OAKLAHOMA CITY,	. RD STE 801	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Dele ANTHONY, ROBERT 3604 N MCKINLEY OKLAHOMA CITY, C	•	Title: Name: Address: City-St-Zip:	VILLARROEL 3705 W. MEM	K) Change ()Addition SIEVERT, MATIAS IORIAL RD STE 801 ITY, OK 73134	
Title: Name: Address: City-St-Zip:	D () Dele LAKE, STEPHEN 241 JAMIE WHITTEI SALTILLO, MS 388	N BLVD	Title: Name: Address: City-St-Zip:	CRESPO LEC 3705 W. MEM	K) Change ()Addition HNER, ALEJANDRO IORIAL RD STE 801 ITY, OK 73134	
Title: Name: Address: City-St-Zip:	D () Dele HILL, STEVE 900 CIRCLE 75 PKV ATLANTA, GA 3033	VY, STE 1600	Title: Name: Address: City-St-Zip:	BENSON, RIC 3705 W. MEM	K) Change ()Addition HARD IORIAL RD STE 801 EITY, OK 73134	

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: NICOLE BOWEN 03/14/2007 ST