2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17030

Entity Name: GOLF USA, INC.

FILED Jan 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3705 W. MEMORIAL SUITE 801 OKLAHOMA CITY, OK 73134 US **Current Mailing Address: New Mailing Address:** 3705 W. MEMORIAL SUITE 801 OKLAHOMA CITY, OK 73134 US FEI Number: 73-1275602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BUSINESS FILINGS INCORPORATED** 1203 GOVERNORS SQUARE BLVD STE 101 TALLAHASSEE, FL 32301 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition ANTHONY, TOM Name: Name: 3705 W MEMORIAL Address: Address: City-St-Zip: OKLAHOMA CITY, OK 73134 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BOWEN, NICOLE Name: 3705 W. MEMORIAL RD STE 801 Address: Address: OAKLAHOMA CITY, OK 73134 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition VILLARROEL SIEVERT, MATIAS Name: Name: 3705 W. MEMORIAL RD STE 801 Address: Address: City-St-Zip: OKLAHOMA CITY, OK 73134 City-St-Zip: Title: () Delete Title: () Change () Addition CRESPO LECHNER, ALEJANDRO Name: Name: Address: 3705 W. MEMORIAL RD STE 801 Address: City-St-Zip: OKLAHOMA CITY, OK 73134 City-St-Zip: Title: Title: () Delete () Change () Addition BENSON, RICHARD Name: Name: 3705 W. MEMORIAL RD STE 801 Address: Address: City-St-Zip: OKLAHOMA CITY, OK 73134 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: NICOLE BOWEN CFO 01/07/2008