

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 31 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P18377 (2)
 1. Corporation Name
NATIONAL GOLF FOUNDATION I, INC.



Principal Place of Business 1150 SOUTH U.S. HIGHWAY 1 SUITE 401 JUPITER FL 33477 US	Mailing Address 1150 SOUTH U.S. HIGHWAY 1 SUITE 401 JUPITER FL 33477 US
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3. Date Incorporated or Qualified 03/10/1988	4. FEI Number 36-2921655	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	30
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARROW, JOE LOUIS J	1.2 NAME	
STREET ADDRESS	12364 ALAMEDA PKW	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKEWOOD CO	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, CINDY	2.2 NAME	
STREET ADDRESS	100 INTERNATIONAL GOLF DR	2.3 STREET ADDRESS	ADDRESS CHANGE ONLY
CITY-ST-ZIP	DAYTONA BEACH FL	2.4 CITY-ST-ZIP	6201 MOUNTAIN VIEW ROAD
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABRAIN, ED	3.2 NAME	
STREET ADDRESS	333 BRIDGE ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRHAVEN MA	3.4 CITY-ST-ZIP	
TITLE	CD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAXON, ROBERT	4.2 NAME	
STREET ADDRESS	1120 AVENUE OF THE AMERICAS	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	4.4 CITY-ST-ZIP	
TITLE	PCEO <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEDITZ, JOSEPH F.	5.2 NAME	
STREET ADDRESS	1150 S. U.S. HWY. ONE, SUITE 401	5.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	5.4 CITY-ST-ZIP	
TITLE	VCD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CREELMAN, SCOTT	6.2 NAME	
STREET ADDRESS	425 MEADOW STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	CHICOPEE MA	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joseph F. Beditz* Joseph F. Beditz March 17, 1998 561-744-6006

CP2E037 (10/97)