FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 8:22

DOCUMENT # P18379 (8)

1. Corporation Name

NATIONAL GOLF FOUNDATION, INC.

Principal Place of Business	Mailing Address
1150 SOUTH U.S. HIGHWAY 1 STE 401 JUPITER FL 33477 US	1150 SOUTH U.S. HIGHWAY 1 STE 401 JUPITER FL 33477 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/10/1988
3a. Date of Last Report: 03/01/1994
4. FEI Number: 36-2250699 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

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

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VC	11 TITLE	VC	☒ Change ☐ Addition
NAME	ABRAIN, ED	12 NAME	JOHNSON, ROBERT (D)	
STREET ADDRESS	8700 W. BRYNMAWR, THIRD FLOOR	13 STREET ADDRESS	3030 LBJ FREEWAY, SUITE 600	
CITY-ST-ZIP	CHICAGO IL	14 CITY-ST-ZIP	DALLAS, TX	
TITLE	S	21 TITLE		☐ Change ☐ Addition
NAME	O'GRADY, PATRICK	22 NAME		
STREET ADDRESS	147 CENTRE STREET	23 STREET ADDRESS		
CITY-ST-ZIP	BROCKTON MA	24 CITY-ST-ZIP		
TITLE	C	31 TITLE	C	☒ Change ☐ Addition
NAME	VAN DYKE, ED	32 NAME	ABRAIN, ED (D)	
STREET ADDRESS	1153 SO US HWY 1, STE 401	33 STREET ADDRESS	200 W. BROADWAY	
CITY-ST-ZIP	JUPITER FL	34 CITY-ST-ZIP	LOUISVILLE, KY	
TITLE	T	41 TITLE	T	☒ Change ☐ Addition
NAME	BONANNI, PETER	42 NAME	MAXON, ROBERT (D)	
STREET ADDRESS	TWO PARK AVENUE	43 STREET ADDRESS	1120 AVENUE OF THE AMERICAS	
CITY-ST-ZIP	NEW YORK NY	44 CITY-ST-ZIP	NEW YORK, NY	
TITLE	P	51 TITLE		☐ Change ☐ Addition
NAME	BEDITZ, JOSEPH F.	52 NAME		
STREET ADDRESS	1150 SO US HWY 1, STE 401	53 STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Beditz Jr. April 28, 1995 (407) 744-6006
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
JOSEPH BEDITZ

0013018