2002 UNIFORM BUSINESS REPORT (UBR)

May 30, 2002 8:00 am Secretary of State **DOCUMENT # P18379** 1. Entity Name 04-29-2002 90155 007 ****61.25 NATIONAL GOLF FOUNDATION, INC. Principal Place of Business Mailing Address 32791 1150 SOUTH_EU.S. HIGHWAY-1 1150 SOUTH U.S. HIGHWAY 1 STE 401 STE 401 JUPITER FL 33477 JUPITER FL 33477 US-US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-2250699 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 City Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent algneture required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Addition Change : 9/01 BARROW, JOE NAME NAME Cindy Davis STREET ADDRESS 425 SOUTH LEGACY TRAIL STREET ADDRESS 7580 Commerce Center Drive CITY-ST-ZIP CITY-ST-ZIP SAINT AUGUSTINE FL 32092 Orlando, FL 32819-8947 TITLE ☐ Delate ☐ Change Addition V C NAME DAVIS, CINDY NAME David Pillsbury STREET ADDRESS 7580 COMMERCE CENTER DR. STREET ADDRESS 2951 28th Street CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32819-8947 Santa Monica, CA TITLE 🛂 Delete TITLE Addition NAME ABRAIN, ED NAME STREET ADDRESS 333 BRIDGE STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Fairhaven ma</u> TITLE **Delete** TITLE Secretary/ Treasurer ☐ Change TX Addition NAME MAXON, ROBERT NAME Mark King STREET ADDRESS 1120 AVE OF THE AMERICAS STREET ADDRESS 5545 Fermi Court CITY-ST-ZIP NEW YORK NY CITY-ST-ZIP Carlsbad, CA 92008 TITLE PCEO · ☐ Delete ITTLE ☐ Change ☐ Addition NAME BEDITZ, JOSEPH F. NAME STREET ADDRESS 1150 \$0 US HWY 1, STE 401 STREET ADDRESS CITY-SI-7IP CITY-ST-ZIP <u>Jupiter Fl</u> TITLE D· Delete TITLE ☐ Change Addition HOFFMAN, MICHAEL J NAME NAME STREET ADDRESS 8111 LYNDALE AVE. SOUTH STREET ADDRESS CITY-ST-ZIP <u>|BLOOMINGTON MN 55420-1196</u>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

4,12,02

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SIGNATURE: .

FILED