## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE APPLICATION Glenda E. Hood **FOR** 





Secretary of State DIVISION OF CORPORATIONS

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1. Corporation Name

JIM COLBERT GOLF, INC.

Principal Place of Business

Mailing Address

2951 28TH ST

SANTA MONICA CA 90405

2951 28TH ST

SANTA MONICA CA 90405



03 DEC 10 AM 9:59

SECRETARY OF STATE ALLAHASSEE, FLORIDA

If above a	ddresses are	incorrect in any way, lir	ne through incorrect in	nformation and	enter correction belo	ow.	itin;	STATEME	NT	03
If above addresses are incorrect in any way, lin  2. New Principal Office Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip Country  7. Names and Street Addresses of Each Officer  Name of Officers  and/or Pirectors		3. New Maili	New Mailing Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida     07/18/1989				
Suite, Apt.	#, etc.		Suite, Apt. #,	etc.			FEI Numbe		017 107	T-T
City & State	Principal Office Address, If Applicable pt. #, etc.  tate  Country  es and Street Addresses of Each Office 2 Name of Office and/or Director  PRICE, DAVID G Neil M. MIller  SAUER, EDWARD R Dona Tanaka  PRICE, DALLAS P Jonathan Langer	City & State	City & State		<sup>3,</sup>	88-0199332		Applied For		
V., L. 2.2		, , , , ,	,			C NOC			Not Applicable	
Zip		Country	Zip	•	Country		CERTIFICATI	E OF STATUS DESIRED 🔲	\$8.75 Ac for a C	dditional Fee required Certificate of Status
7. Names	and Street Ad	dresses of Each Officer	and/or Director (Flo	rida nonprofit o	corporations must list	at least 3 o	directors)			
. Title(s) 1	2	Name of Officer and/or Directors		3	Street Address of Officer and/or Di			City	/ State / 2	Zip
<b>PD</b>				2951 28TH 2951 28	Sth Street,	suite	3000	Santa Monica CA (		90405:
CFOD	SAUER, ED	WARD R		2951 28TH	ST.			SANTA MONICA CA (	90495	
<u> </u>	Dona T	anaka		2951_28	Sth Street,	_Suite	_3000_	Santa MOnica,	CA	_90405
D <sub>D</sub>				<b>2951 28TH</b> 2951 28	Sth Street,	suite	3000	Santa Monica CA S		90405
D	D David Castelblanco			2951 28	th Street,	suite	3000	Santa MOnica,	CA	90405
	<del>                                     </del>				To the second se			<del> </del>		******

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent				
DAGAGORI INCOCCOLATED	Name				
PARACORP INCORPORATED 236 EAST 6TH AVENUE	Street Address (P.O. Box Number is Not Acceptable).				
TALLAHASSEE FL 32303	Suite, Apt. #, Etc. 20025508582 12/18/03-01057-030 **750.00				
	City State Zip Code				

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of

D

Merrick Kleeman

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

ona Tanaka, Secretary

12/5/03

suite 3000 Santa Monica CA 90405

Daytime Phone #

292

## STATE OF FLORIDA

## REGISTERED AGENT CONSENT FORM

DATE:

12/8/03

**ENTITY NAME:** 

Jim Colbert Golf, Inc.

**Paracorp Incorporated**, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Denise Zollner, Assistant Secretary

Paracorp Incorporated