

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 03, 2001 8:00 am**  
**Secretary of State**  
 05-03-2001 91100 035 \*\*\*150.00

**DOCUMENT # P32080**

1. Entity Name  
**MACGREGOR GOLF COMPANY**

Principal Place of Business

Mailing Address

1601 S. SLAPPEY BLVD.  
 ALBANY GA 31701-2631  
 US

P.O. BOX 3929  
 ALBANY GA 31706-3929  
 US

2. Principal Place of Business

3. Mailing Address

**1000 Pecan Grove Drive**

**Same as above**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**Albany, GA**

Zip

Country

Zip

Country

**31701**

4. FEI Number **58-2285422**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete  
 NAME **MARSH, WILLIAM**  
 STREET ADDRESS **2109 POPLARWOOD CT STE 225**  
 CITY-ST-ZIP **RALEIGH NC 27604**

TITLE **/C** ☒ Change ☐ Addition  
 NAME **Schneider, Barry L.**  
 STREET ADDRESS **1001 Bayhill Drive, Suite 315**  
 CITY-ST-ZIP **San Bruno, CA 94066**

TITLE **S** ☐ Delete  
 NAME **FRANK, CHARLES**  
 STREET ADDRESS **650 CALIFORNIA ST STE 2400**  
 CITY-ST-ZIP **SAN FRANCISCO CA 94108**

TITLE **S** ☒ Change ☐ Addition  
 NAME **Frank, Charles**  
 STREET ADDRESS **1001 Bayhill Drive, Suite 315**  
 CITY-ST-ZIP **San Bruno, CA 94066**

TITLE **CFO** ☒ Delete  
 NAME **RAVID, CORY**  
 STREET ADDRESS **650 CALIFORNIA ST STE 2400**  
 CITY-ST-ZIP **SAN FRANCISCO CA 94108**

TITLE **V** ☒ Change ☐ Addition  
 NAME **Eckman, Richard D.**  
 STREET ADDRESS **1000 Pecan Grove Drive**  
 CITY-ST-ZIP **Albany, GA 31701**

TITLE **V** ☒ Delete  
 NAME **Eckman, Richard D.**  
 STREET ADDRESS **1000 Pecan Grove Drive**  
 CITY-ST-ZIP **Albany, GA 31701**

TITLE **D** ☐ Change ☒ Addition  
 NAME **Richard A. Bocci**  
 STREET ADDRESS **1001 Bayhill Drive, Suite 315**  
 CITY-ST-ZIP **San Bruno, CA 94066**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
 NAME **William H. Hedden**  
 STREET ADDRESS **1001 Bayhill Drive, Suite 315**  
 CITY-ST-ZIP **San Bruno, CA 94066**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition  
 NAME **John McNulty**  
 STREET ADDRESS **1000 Pecan Grove Drive**  
 CITY-ST-ZIP **Albany, GA 31701**

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)