


2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
May 29, 2007 8:00 am
Secretary of State

05-29-2007 90042 048 ***558.75

DOCUMENT # P33566

1. Entity Name
SAN DIEGO GOLF ACADEMY, INC.



Principal Place of Business 1200 E. ALTAMONTE DRIVE UNIT 1010 ALTAMONTE SPRINGS, FL 32701 US	Mailing Address 7373 N. SCOTTSDALE BLVD. SUITE B-100 SCOTTSDALE, AZ 85254 US
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40118653



2. Principal Place of Business - No P.O. Box #	3. Mailing Address 7373 N. SCOTTSDALE ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE B-100

05072007 Chg-P CR2E034 (12/06)

City & State SCOTTSDALE, AZ	4. FEI Number 95-3609840	Applied For Not Applicable
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Zip 85253	Country	Zip 85253	Country
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent

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

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HUTTON, JAMES D PHD 300 RIVERHILLS BUSINESS PARK, STE 300 BIRMINGHAM, AL 35242 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MILLER, ROGER 300 RIVERHILLS BUSINESS PARK STE 300 BIRMINGHAM, AL 35242 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SWARTZWEKLER, ROGER L 300 RIVERHILLS BUSINESS PARK STE 300 BIRMINGHAM, AL 35242 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TRIERWEILER, CHARLES 300 RIVERHILLS BUSINESS PARK STE 300 BIRMINGHAM, AL 35242 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BEYER, JEFFREY D 1 NORTH WACKER DRIVE STE 4800 CHICAGO, IL 60606 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALLAHAN, ROBERT 300 RIVERSIDE BUSINESS PARK STE 300 CHICAGO, IL 60606 <input type="checkbox"/> Delete


11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUTTON, JAMES D PHD 300 RIVERHILLS BUSINESS PARK STE 300 BIRMINGHAM, AL 35242 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T/D MOORE, JR., THOMAS A. 300 RIVERHILLS BUSINESS PARK STE 300 BIRMINGHAM, AL 35242 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SWARTZWELDER, ROGER L 300 RIVERHILLS BUSINESS PARK STE 300 BIRMINGHAM, AL 35242 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MAILLETTE, RONALD 300 RIVERHILLS BUSINESS PARK STE 300 BIRMINGHAM, AL 35242 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEYER, JEFFREY D 1 NORTH WACKER DRIVE STE 4800 CHICAGO, IL 60606 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CALLAHAN, ROBERT 300 RIVERSIDE BUSINESS PARK STE 300 CHICAGO, IL 60606 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEE PAGE 3 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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DOCUMENT # **P33566**
 1. Entity Name
SAN DIEGO GOLF ACADEMY, INC.



ATTACHMENT

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Principal Place of Business 1200 E. ALTAMONTE DRIVE UNIT 1010 ALTAMONTE SPRINGS, FL 32701 US		Mailing Address 7373 N. SCOTTSDALE BLVD. SUITE B-100 SCOTTSDALE, AZ 85254 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 95-3609840		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

05072007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331		7. Name and Address of New Registered Agent	
		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. I am familiar with, and accept the obligations of registered agent.

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


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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	WILLIAMS, MICHAEL
STREET ADDRESS		STREET ADDRESS	300 RIVERHILLS BUSINESS PARK STE 300
CITY-ST-ZIP		CITY-ST-ZIP	BIRMINGHAM, AL 35242
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	BAKALAR, JOHN
STREET ADDRESS		STREET ADDRESS	1 NORTH WACKER DRIVE STE 4800
CITY-ST-ZIP		CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	BLUMENTHAL, DANIEL
STREET ADDRESS		STREET ADDRESS	1 NORTH WACKER DRIVE STE 4800
CITY-ST-ZIP		CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	FRAZEE JR, JOHN P
STREET ADDRESS		STREET ADDRESS	300 RIVERHILLS BUSINESS PARK STE 300
CITY-ST-ZIP		CITY-ST-ZIP	BIRMINGHAM, AL 35242
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	GILL, DANIEL M
STREET ADDRESS		STREET ADDRESS	300 RIVERHILLS BUSINESS PARK STE 300
CITY-ST-ZIP		CITY-ST-ZIP	BIRMINGHAM, AL 35242
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	HORNE, KENNETH C
STREET ADDRESS		STREET ADDRESS	300 RIVERHILLS BUSINESS PARK STE 300
CITY-ST-ZIP		CITY-ST-ZIP	BIRMINGHAM, AL 35242

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SIGNATURE: SEE PAGE 3
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

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TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	LAVIN, MICHAEL
STREET ADDRESS		STREET ADDRESS	300 RIVERHILLS BUSINESS PARK STE 300
CITY-ST-ZIP		CITY-ST-ZIP	BIRMINGHAM, AL 35242
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	STEIN, AVY H
STREET ADDRESS		STREET ADDRESS	1 NORTH WACKER DRIVE STE 4800
CITY-ST-ZIP		CITY-ST-ZIP	CHICAGO, IL 60606
TITLE	<input type="checkbox"/> Delete	TITLE	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	ZAGNONI, PAUL
STREET ADDRESS		STREET ADDRESS	7373 NORTH SCOTTSDALE ROAD STE B100
CITY-ST-ZIP		CITY-ST-ZIP	SCOTTSDALE, AZ 85253
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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SIGNATURE:  **PAUL ZAGNONI, PRESIDENT** 05/23/2007 (800) 342-7342

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Display Phone #