2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR I

FILED DOCUMENT # **P92000003337** Apr 24, 2000 8:00 am Secretary of State 1. Entity Name JIM FAZIO INTERNATIONAL GOLF DESIGN, INC. 04-24-2000 90144 022 ***150.00 Principal Place of Business Mailing Address 140 INTRACOASTAL POINTE DRIVE 140 INTRACOASTAL POINTE DRIVE **STE 110** STE 110 JUPITER FL 33477-5064 JUPITER FL 33477 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0371030 Not Applicable Country Zip Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FAZIO, VINCENT M Street Address (P.O. Box Number is Not Acceptable) 140 INTRACOASTAL POINTE DRIVE **STE 110** JUPITER FL 33477 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12, **PST** ☐ Delete TITLE ☐ Change ☐ Addition TITLE FAZIO, VINCENT M NAME NAME 140 INTRACOASTAL POINTE DRIVE STE 110 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Addition ☐ Change ☐ Delete TITE TITLE FAZIO, JAMES M. NAME STREET ADDRESS 140 INTRACOASTAL POINTE DR. STE 110 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP JUPITER FL ☐ Change Addition Delete TITLE TITLE FAZIO, THOMAS J. NAME NAME STREET ADDRESS 140 INTRACOASTAL POINTE DRIVE STE 110 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Jupiter fl ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 offer like empowered.