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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000040510 (8)

1. Corporation Name

ROBBINS/KOCH GOLF DESIGNS, INC.

Principal Place of Business

P.O. BOX 272807
TAMPA FL 33688-2807

Mailing Address

ATTN. TONY MATTERA
P.O. BOX 272807
TAMPA FL 33688-2807
US

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

06/08/1993

3a. Date of Last Report

03/19/1996

4. FEI Number

59-3201471

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLS, FREDERICK J
MORRISON, MORRISON & MILLS P.A.
1200 W. PLATT ST. SUITE 100
TAMPA FL 33606

81 Name

Same Agent New address

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

1200 WEST PLATT STREET

83

SUITE 100

84 City

TAMPA

FL

85 Zip Code

33606

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME ROBBINS, RICHARD G
STREET ADDRESS 100 HARDAWAY CT.
CITY-ST-ZIP CARY NC

TITLE D ☐ DELETE
NAME ROBBINS, VIRGINIA A
STREET ADDRESS 100 HARDAWAY CT.
CITY-ST-ZIP CARY NC

TITLE VD ☐ DELETE
NAME KOCH, GARY D
STREET ADDRESS P.O. BOX 272807 NA
CITY-ST-ZIP TAMPA FL

TITLE VSTD ☐ DELETE
NAME MATTERA, TONY
STREET ADDRESS P.O. BOX 272807
CITY-ST-ZIP TAMPA FL 33688-2807

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Tony A. Mattera - 7/6/97 (8/2/99-5536)

CR2E034 (9/96)