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95 MAY -1 PH 3:09

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



**CORPORATION
ANNUAL REPORT
1995**

**FLORIDA DEPARTMENT OF STATE
Carroll B. Murrain
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # P94000003155

Bumper Golf on Wheels Inc.
Principal Place of Business: UNIT 246
Mailing Address: 22770 S. TAMiami TRAIL
ESTERO, FL. 33928

**600001482646
-05/10/95--01065--001
***200.00 ***200.00**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21	State, Apt # etc	26	State, Apt # etc	4. FEI Number		Applied For	
22	City & State	27	City & State	65-0458079		Not Applicable	
23	City & State	28	City & State	5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	City & State	29	City & State	6. Election Campaign Financing Trust Fund Contribution			
25	City & State	30	City & State	8. This corporation has liability for intangible tax under 199.032, Florida Statutes			
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HARDY F. DARDEN				01 Name			
22770 S. TAMiami TR.				02 Street Address (P O Box Number is Not Acceptable)			
ESTERO, FL.				03			
33928 UNIT 246				04 City			
				FL		05 Zip Code	

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 _____ (Type or print name of registered agent and FEI number)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	STREET ADDRESS	1. TITLE	2. NAME	3. STREET ADDRESS
PRESIDENT/TREASURER	HARDY F. DARDEN	22770 TAMiami TR. S. UNIT 246			
CITY, ST, ZIP		ESTERO, FL. 33928	4. CITY, ST, ZIP		
TITLE	NAME	STREET ADDRESS	21. TITLE	22. NAME	23. STREET ADDRESS
VIC. PRESIDENT/SECRETARY	JULIA V. DARDEN	22770 TAMiami TR. S. UNIT 246			
CITY, ST, ZIP		ESTERO, FL. 33928	24. CITY, ST, ZIP		
TITLE	NAME	STREET ADDRESS	31. TITLE	32. NAME	33. STREET ADDRESS
CITY, ST, ZIP			34. CITY, ST, ZIP		
TITLE	NAME	STREET ADDRESS	41. TITLE	42. NAME	43. STREET ADDRESS
CITY, ST, ZIP			44. CITY, ST, ZIP		
TITLE	NAME	STREET ADDRESS	51. TITLE	52. NAME	53. STREET ADDRESS
CITY, ST, ZIP			54. CITY, ST, ZIP		
TITLE	NAME	STREET ADDRESS	61. TITLE	62. NAME	63. STREET ADDRESS
CITY, ST, ZIP			64. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119 07(1)(b), Florida Statutes. I further certify that the information included 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. That I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 117, Florida Statutes, and that my name appears in Block 12 or Block 13, or on an attachment with an address.

SIGNATURE: *Hardy F. Darden* HARDY F. DARDEN 5/1/95 ^{8:3} 495-987