## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

Profit Corporation Annual Report

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000034640 (0)

## TURNBULL GOLF ENTERPRISES, INC.

12121-A PHILLIPS HWY. 12121-A PHILLIPS HWY. JACKSONVILLE FL 32256-1788 JACKSONVILLE FL 32256 3. Date Incorporated or Qualified 3a. Date of Last Report 05/04/1994 11/08/1996 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-3235276 Not Applicable 26 Suite, Apt. #, etc Suite. Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country Zip under s. 199.032, 8. This corporation has liability for intangible tax Yes No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TURNBULL, BARRY D 2441 FALLEN TREE DRIVE E 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32248 83 84 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 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registered agent and too if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Addition Change ÞΝ DEFELE 1.1 TITLE THE TURNBULL, BARRY NAME 2441 FALLEN TREE 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32246 1.4 CITY-ST-ZIP CITY - ST - 7⊯ Change Addition DELETE 1:11,6 21 TITLE TURNBULL, CORINNE 2.2 NAME NAME 2441 FALLEN TREE 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32246 2 4 CITY-ST-Z# CHY-ST 7.P DELETE Change Addition 31 TITLE LIU 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CHTY - 51 - ZIP Addition DELETE 4.1 TITLE THE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDITIESS CDY-\$1-74P 4.4 CITY-ST-ZIP DELETE 5.1 TITLE TILLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY - ST - ZIP Colar-St. ZIF Addition DELETE 6.1 TITLE THE 10000215791 -04/29/97--01042--02 \*\*\*165.00 NAM: 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. If 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; 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 32 in changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

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