

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90208 022 ***150.00

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1. Entity Name
CLUBCORP GRAPHICS, INC.



Principal Place of Business
3001 COUNTRYSIDE BLVD.
CLEARWATER, FL 34621

Mailing Address
P.O. BOX 819087
C/O TAX DEPT
DALLAS, TX 75381 US

14009665



01152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-2570324

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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: _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HOWE, DOUGLAS
STREET ADDRESS 3030 LBJ FRWY
CITY-ST-ZIP DALLAS, TX 75234

TITLE VPD
NAME ~~DEVITZ, ROBERT~~ **LARGENT, DAVID**
STREET ADDRESS 3030 LBJ #700
CITY-ST-ZIP DALLAS, TX

TITLE T
NAME POWER, KEVIN
STREET ADDRESS 3030 LBJ FRWY
CITY-ST-ZIP DALLAS, TX

TITLE S
NAME HENSLEE, THOMAS
STREET ADDRESS 3030 LBJ FRWY
CITY-ST-ZIP DALLAS, TX 75234

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KEVIN POWER 3/18/04 972-243-6191