2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000084365

COUPLES, FRED

RESTON, VA 20191

1851 ALEXANDER BELL DR, SUITE 410

Name:

Address: City-St-Zip:

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FILED Apr 27, 2009 Secretary of State

Entity Name: COUPLES/BATES GOLF DESIGN, INC. **Current Principal Place of Business: New Principal Place of Business:** 5606 PGA BLVD. SUITE 111 PALM BEACH GARDENS, FL 33418 **New Mailing Address: Current Mailing Address:** 1851 ALEXANDER BELL DRIVE SUITE 410 RESTON, VA 20191 US FEI Number: 65-0563346 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FHS CORPORATE SERVICES, INC. 11780 US HWY 1 SUITE 300 N. PALM BEACH, FL 33408 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ROACH, O. LYNN JR. Name: Name: 1851 ALEXANDER BELL DR, SUITE 410 Address: Address: City-St-Zip: RESTON, VA 20191 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BATES, GENE D Name: 5606 PGA BLVD., SUITE 111 Address: Address: PALM BEACH GARDENS, FL 33418 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: O. LYNN ROACH, JR. D 04/27/2009