

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000084365

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** COUPLES/BATES GOLF DESIGN, INC.

**Current Principal Place of Business:**

5606 PGA BLVD.  
SUITE 111  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

1851 ALEXANDER BELL DRIVE  
SUITE 410  
RESTON, VA 20191 US

**New Mailing Address:**

**FEI Number:** 65-0563346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FHS CORPORATE SERVICES, INC.  
11780 US HWY 1  
SUITE 300  
N. PALM BEACH, FL 33408 US

**Name and Address of New Registered Agent:**

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:**

Title: D  
Name: ROACH, JR., O. LYNN  
Address: 1851 ALEXANDER BELL DR, SUITE 410  
City-St-Zip: RESTON, VA 20191

Title: D  
Name: BATES, GENE D  
Address: 5606 PGA BLVD., SUITE 111  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D  
Name: COUPLES, FRED  
Address: 1851 ALEXANDER BELL DR, SUITE 410  
City-St-Zip: RESTON, VA 20191

I hereby 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 all other like empowered.

SIGNATURE: O. LYNN ROACH, JR.

D

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date