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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P94000086621 (7)

MJR GOLF ASSOCIATES, INC.

RAYNOR, KERRY T

4132 AMBER LN

PALM HARBOR FL

RAYNOR, JUSTIN M

CLEARWATER FL

2660 BURNTFORK DR

Principal Place of Business Mailing Address 4132 AMBER LN PALM HARBOR FL 34685 PALM HARBOR FL 34685 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>11/28/1994</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3279088 21 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Zφ Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent R1 Name RAYNOR, MARK J 4132 AMBER LN Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 34685 83 City 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 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE NAME RAYNOR, MARK J 1.2 NAME 4132 AMBER LN STREET ADDRESS 1.3 STREET ADDRESS PALM HARBOR FL CITY-ST-2#P 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME RAYNOR, MICHEAL 2.2 NAME STREET ADDRESS 4132 AMBER LN 2.3 STREET ADDRESS PALM HARBOR FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE

6.4 CITY-ST-ZIP City-ST-7IP 14. Nereby 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

4.4 CITY-ST-7IP

3.4. CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

Change

Change

Change

Addition

Addition

Addition

FILED

Apr 14 1998 8:00am

Secretary of State