FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 17, 2001 8:00 am Secretary of State DOCUMENT # P94000086621 1. Entity Name MJR GOLF ASSOCIATES, INC. 04-17-2001 90082 017 \*\*\*158.75 Principal Place of Business Mailing Address 4132 AMBER LN 4132 AMBER LN PALM HARBOR FL 34685 PALM HARBOR FL 34685 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3279088 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAYNOR, MARK J Street Address (P.O. Box Number is Not Acceptable) 4132 AMBER LN PALM HARBOR FL 34685 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 TITLE ☐ Delete RAYNOR, MARK J NAME NAME STREET ADDRESS STREET ADDRESS 4132 AMBER LN CITY-ST-ZIP CITY-ST-ZIP PALM HARBOR FL TITLE ☐ Delete TITLE BRADLEY, DAVID 346 4132 AMBER LAND, PALM HARBOR, FLA NAME BRADLEY, DAVID NAME STREET ADDRESS STREET ADDRESS 9298 ULMERTON RD #308 CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33771 TITLE Delete RAYNOR, KERRY T NAME NAME STREET ADDRESS STREET ADDRESS 4132 AMBER LN CITY-ST-ZIP CITY-ST-ZIP PALM HARBOR FL 34685 Change ☐ Addition TITLE Delete TITLE RAYNOR, JUSTIN M NAME NAME STREET ADDRESS 2660 BURNTFORK DR STREET ADDRESS CITY-ST-7IP CITY-ST-7IP CLEARWATER FL Change **X** Delete ☐ Addition TITLE TITLE GRAHAM, RICHARD NAME NAME STREET ADDRESS 4132 AMBER LANE STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP PALM HARBOR FL 34685 TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

Changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED IN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Description Printed Name of SIGNING OFFICER OR DIRECTOR