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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000030377 (2)**

1. Corporation Name

~~GIVET GOLF, INC.~~ CHANGE NAME AMENDMENT FILED 12/5/95
PERSIMMON TECHNOLOGY, INC.

Principal Place of Business	Mailing Address
~~1623 E. ALFRED ST.~~ ~~TAVARES FL 32778~~	~~1623 E. ALFRED ST.~~ ~~TAVARES FL 32778~~

3. Date Incorporated or Qualified: 04/13/1995
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 4400 PGA BLVD	26 4400 PGA BLVD
Suite, Apt. #, etc. 22 SUITE 700	Suite, Apt. #, etc. 27 SUITE 700
City & State 23 PALM BEACH GARDENS, FL	City & State 28 PALM BEACH GARDENS, FL
Zip 24 33410 / Country 25 USA	Zip 29 33410 / Country 30 USA

4. FEI Number: 65-0674297 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired: ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~CROSS, HERB~~
~~1623 E. ALFRED ST.~~
~~TAVARES FL 32778~~

10. Name and Address of New Registered Agent

81 Name: LARRY GARCIA, SR. V.P.
82 Street Address (P.O. Box Number is Not Acceptable): PERSIMMON TECHNOLOGY, INC.
83 4400 PGA BLVD.
84 City: PALM BEACH GARDENS FL 85 Zip Code: 33410

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: LARRY GARCIA, SR., V.P. — LARRY GARCIA, V.P. — 6-18-96
Signature, typed or printed name of Registered Agent and title of officer — (NOTE: Registered Agent's signature required for electronic filing) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☒ Addition VICE-PRESIDENT LARRY GARCIA 4400 PGA BLVD PALM BEACH GARDENS, FL 33410
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	900001902058 -07/23/96--01104--009 ***8.75 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	300001902053 -07/23/96--01104--010 ***225.00 ☐ Change ☐ Addition 7/23 JB

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: LARRY GARCIA, SR. V.P. 6-18-96 (561) 627-8889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #