

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P95000032482****1. Entity Name**  
**MJM GOLF ENTERPRISES, INC.****FILED**  
**Aug 01, 2000 8:00 am**  
**Secretary of State**

08-01-2000 90006 009 \*\*\*150.00

**Principal Place of Business**  
2987 MCMULLENBOOTH RD  
CLEARWATER FL 34621  
US**Mailing Address**  
2987 MCMULLENBOOTH RD  
CLEARWATER FL 34621  
US

DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

**4. FEI Number** 59-3313447

Applied For

Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**HERSEM, THOMAS G  
1421 COURT ST, SUITE B  
CLEARWATER FL 34616

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**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)

DATE

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.**  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State****10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
Trust Fund Contribution.**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
MURPHY, MICHAEL J  
2987 MCMULLEN BOOTH RD  
CLEARWATER FL 34621 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition**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:**MICHAEL J. MURPHY  
President

MICHAEL J. MURPHY

Date

7/27/00

Daytime Phone #

(727)

726

8481

attachment

14540037482

80104054

JULY 25, 2000

TO: FLORIDA DEPT. OF STATE DIVISION OF CORPORATIONS

I am writing this letter as directed by one of your employee's that answered some of my questions on the phone the other day. I called in to ask why I had not received a first notice of the Uniform Business Report and found out that it had been mailed about the time my exfiance' and myself where breaking up. She was doing most of my books in my small company and purposely messed a lot of things up. The first report never got into my hands. I apologize that this was not followed closer. As directed by your employee they told me to send the one hundred and fifty dollars in and a brief explanation and you would let me know if any other fee's where needed. Any help will be greatly appreciated

Sincerely



Michael J. Murphy  
M.J.M. GOLF ENT. INC.