2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000032482

1. Entity Name
MJM GOLF ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2987 MCMULLENBOOTH RD	2987 MCMULLENBOOTH RD
CLEARWATER, FL 33761 US	CLEARWATER, FL 33761 US

DO NOT WRITE IN THIS SPACE

02202006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3313447	Not Applicable

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

6. Name and Address of Current Registered Agent

HERSEM, THOMAS G
1421 COURT ST, SUITE B
CLEARWATER, FL 34616

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

U000000448423
03/09/06--80011--021 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	MURPHY, MICHAEL J
STREET ADDRESS	2987 MCMULLEN BOOTH RD
CITY-ST-ZIP	CLEARWATER, FL 34621

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ President   2-24-06   7277268481

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #