P9500040450

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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TALLAHASSEE FLORIDA



COVER LETTER

Amendment Section

TO:

Division of Corporations			
SUBJECT: Golf Tridustries Management, Inc (Name of Corporation)			
DOCUMENT NUMBER: \$\frac{29500040450}{}			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Sally MacDonald (Name of Contact Person)			
Golf Industries Management, Inc. (Firm/Company)			
5505 Grande Lagoon Blvd (Address)			
Pensacola FL 32507 (City/State and Zip Code)			
For further information concerning this matter, please call:			
John MacDonald at (251) 970 - 1444 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Street Address: Amendment Section			

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Golf Industries Management, Inc 2. The principal office address: 5505 Grande Lagoon Blvd Pensacola, FL 32507
3. The mailing address (if different):
4. Date of incorporation/qualification: 1-28-1997 Document number: P950000 40 45 0
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Harold S. Richmond
227 East Jefferson St.
Quincy, FL 32351
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
John R. Mac Donald
5505 Grande Lagoon Blvd. (P.O. Box NOT acceptable) (P.O. Box NOT acceptable)
The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Sally MacDonald Sec Dreasurer (Significer or an officer or director)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Jan R Montemall 4-7-07
(Signature of Registered Agent) (Date) If signing on behalf of an entity:
(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *