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Apr 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000068456 (9)

1. Corporation Name

GECKO GOLF BALL, INC.

Principal Place of Business

1050 CAPRI ISLES BLVD., M-103
VENICE FL 34292

Mailing Address

1050 CAPRI ISLES BLVD., M-103
VENICE FL 34292-4460



3. Date Incorporated or Qualified
09/01/1995

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 1205 US 41 Bypass So.

2a. Mailing Address

26 1205 US 41 Bypass So

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Venice, FL

27 Venice, FL

City & State

City & State

23 34292

28 34292

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SPEILMAN, RODNEY
1205 US 41 BYPASS SO.
VENICE FL 34292

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signatory: Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/T ☐ DELETE

NAME SPEILMAN, RODNEY
STREET ADDRESS 1211 LAUREL AVE.
CITY-ST-ZIP VENICE FL 34292

TITLE V/S ☒ DELETE

NAME HARFORD, DAVID
STREET ADDRESS 4655 NEPTUNE RD.
CITY-ST-ZIP VENICE FL 34293

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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 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 unchanged, or on an attachment with an address.

SIGNATURE:

Rodney Spielman
President

4.7.97

941.483.3611

Date

Daytime Phone #

CR2E034 (9/96)