

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000003290

Entity Name: LOVETT GOLF COMPANY

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

2940 S HORSESHOE DR
STE 800
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

2940 S HORSESHOE DR
STE 800
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0640090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATHAN, G H ESQ
5551 RIDGEWOOD DR
STE 501
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: LOVETT, WILLIAM E
Address: 1121 SHADY REST LN
City-St-Zip: NAPLES, FL 34103

Title: VCD () Delete
Name: ABDULLAH, DATO M S
Address: GRECIAN GRP LT, BVL, 1 SHOJTON WAY
City-St-Zip: ROBINA HOUSE, SINGAPORE,

Title: PD () Delete
Name: MILLER, JEFFREY A
Address: 681 KATENORE LN
City-St-Zip: NAPLES, FL 34103

Title: SVP () Delete
Name: STEWART, JIMMY C
Address: 2520 TALON CT #204
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM STEWART

VP

04/22/2009

Electronic Signature of Signing Officer or Director

Date