PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000021083

1. Corporation Name

PAR FORE GOLF CO., INC.

May 06, 1999 8:00 am Secretary of State

05-06-1999 90284 031 ***150.00



Principal Place	of Rusiness	Mailing Address			///
18800 134TH WAY NORTH JUPITER FL 33478 JUPITER FL 33478					
50/1/2// 12 55//5				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
				03/04/1996	
2. Principal Pl	ace of Business	2a. Mailing Address	11A ~	4. FEI Number	Applied For
		188	65-0644565	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22 27 27					
City & State		—	MINA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	Countri	28 JUNIEV (17	Country	This corporation owes the current year	
Zip	Country	- 22/18 G	o WA	Personal Property Tax.	Yes No
24	9. Name and Address of Cur		<u>, , , , , , , , , , , , , , , , , , , </u>	10. Name and Address of New Register	
	9. Name and Address of Cur	Terk Negistered Agent	81 Name).	10 col (A) (con)	
JACI	KSON, MICHELLE		K	JOER JAGEON	
18800 134TH WAY NORTH			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	TER FL 33478		83	to take and u.	
0011	TERTE GOTTO				
			84 City	ada c	EL 85 33500
	(5)	0502 and 607 1508. Florida Statutos	the above named corr	poration cubmits this statement for the nurness	of changing its registered
11. Pursuant office or r	to the provisions of Sections 607. egistered agent, ar bath, in the St	ate of Florida. Such change was aut	horized by the corporati	on's board of directors. I hereby adcept the ar	pointment as registered
agent. I a	m milliar with, and adcept the ob	ligations of, Section 607.0505, Florid	la Statutes.	4/28/	79
SIGNATURE		MOTE: C	tegistered Agent signature require		[
12.	Signature, typed or printed name of registered	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D \	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JACKSON, ROBERT M		1.2 NAME		
	18800 134TH WAY NORTH		1.3 STREET ADDRESS		
STREET ADDRESS			1.4 CITY- ST-ZIP		
C(TY-ST-ZIP TITLE	JUPITER FL 33478	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME.	,		2.2 NAME		
	JACKSON, VIRGIL P		2.3 STREET ADDRESS		
STREET ADDRESS	3121 AVENUE J		2.4 CITY-ST-ZIP		i
C/TY-ST-Z/P TITLE	RIVIERA BEACH FL VTM	DELETE	3.1 TITLE		Change Addition
	JACKSON, MICHELLE J	7	3.2 NAME		
NAME STREET ADDRESS	18800 134TH WAY N		3.3 STREET ADDRESS		ĺ
STREET ADDRESS	JUPITER FL		3.4. CITY-ST-ZIP		
CITY-ST-ZIP		□ DELETE	4.1 TITLE		Change Addition
	S S SHANE D		4. 2 NAME		
NAME	JACKSON, SHANE P		4.3 STREET ADDRESS		
STREET ADDRESS	18800 134TH WAY N JUPITER FL 33478		4.4 CITY-ST-ZIP		
CITY-ST-ZIP	JUP!/ER FL 334/8	☐ DELETE	5,1 TITLE		☐ Change ☐ Addition
TITLE			5.2 NAME		
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			54 CITY-ST-ZIP		
CITY-ST-ZIP			6.1 TITLE		☐ Change ☐ Addition
TITLE		_ D+12.12	6.2 NAME		_ ` _
NAME			6.3 STREET ADDRESS		
STREET ADDRESS		\bigcirc	6.4 CITY-ST-ZIP		
CITY-ST-ZIP	i .	1 1	8.7 On 1" Ot "All"		

14. 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 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 reporter 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR