## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P96000033149 (1)

JET GOLF, INC.

**FILED** 

Apr 21 1998 8:00am

Secretary of State

		·			***************************************				
Principa	l Place of Business	Mailing Add	Mailing Address			1 10211441 110 19110 91111 93111 43111			
8810 HUNTINGTON POINTE			8810 HUNTINGTON POINTE						
SAHAS	OTA FL 34238	SAHASUTA	SARASOTA FL 34238			DO NOT WRIT	DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified			
						04/16/1996			
	ipal Place of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	Aj	aplied For	
21	ABOVE	26				65-0672323	N	ot Applicable	
22	, Apt. #, etc.	Suite, Λρ [27]	Suite, Λpt. #, etc.			5. Certificate of Status Desired		Additional equired	
City -	\$ State	City & St.	City & State			Election Campaign Financing     Trust Fund Contribution		May Be to Fees	
<b>  Z</b> ip	Country	Zip	Zip Cour			8. This corporation owes or has p			
24	25 29 30				Personal Property Tax due Jun	e 30. 🔲 Yes 🛭	□Ño		
<u> </u>	9. Name and Address of Curre	ent Registered Age	nt			10. Name and Address of New R	egistered Agent		
	THOMPSON, EDWARD C			81	Name				
8810 HUNTINGTON POINTE SARASOTA FL 34238			82 Street Add		Address (P.O. Box Number is Not Accepta	ble)			
	5.44.65			83					
				84	City		AE Zin	Code	
							FL I I	1	
11. Purs	suant to the provisions of Sections 607.05  e or registered argent, or both, in the State	02 and 607.1508, F	lorida Statutes,	the above	e-named o	corporation submits this statement for the	purpose of changing it	ts registered	
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.									
SIGNAT	JRE								
12.	Signature, typed or printed name of registered a OFFICERS At	NO DIRECTORS	(NOTE: Re	13.	rit signature r	required when reinstating)  ADDITIONS/CHANGES TO OFFE	DATE CERS AND DIRECTOR	S IN 12	
TITLE	P		DELETE	1.1 10 LE		ADDITIONS/OFFANGES TO OFFA	Change	Addition	
NAME	THOMPSON, EDWARD C	_		1.2 NAME			<b>—</b>		
STREET ADI	4444444444444444			1.3 STREET	ADDRESS			[3	
CITY-ST-Z	SARASOTA FL 34238			1.4 CITY - S	T-ZIP			13	
TITLE	VP		DELETE	2.1 HTL€			☐ Change	Addition (	
NAME	THOMPSON, JOY A			2.2 NAME	1			İ	
STREET ADD				2.3 STREET	ADDRESS			ŀ	
CITY-ST-Z	SARASOTA FL 34238		, <u>.</u>	2.4 CITY - S	T-ZIP	<u> </u>			
TITLE	·	L	DELETE	3.1 TITLE			Change	☐ Addition	
NAME			1	3.2 NAME	1				
STREET ADD				3.3 STREET					
CITY-ST-ZI	P	· · · · · · · · · · · · · · · · · · ·	DELETE	3.4. CITY - S 4.1 TITLE	T- ZIP		Change	Addition	
NAME		<b>h</b>	Detrie	4. 2 NAME			Unange	☐ Audilion	
STREET ADE	RFSS :			4.3 STREET	VD9BEGG				
City-St-Zi				4.4 CITY-S					
TITLE			DELETE	5.1 TILE	- 211		Change	Addition	
NAME				5.2 NAME	-				
STREET ADD	RESS			5.3 STREET	ADDRESS				
CITY-ST-ZI	,			54 CITY-ST					
TITLE			DELETE	611MLE			Change	Addition	
NAME				6 2 NAME	1		_		
STREET ADD	RESS			6.3 STREET	ADDRESS				
					- 1			1	

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 logal 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 if changed, or on an attachment with an address.