

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

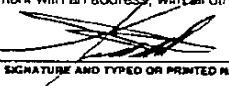
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Aug 16, 2006 8:00 am
Secretary of State

08-08-2006 90002 001 ***150.00

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2nd MOORE CR2E034 (4/06)



DOCUMENT # P96000033298			
1. Entity Name APPLEMAN GOLF ENTERPRISES, INC.			
Principal Place of Business 7940 NW 8TH STREET MARGATE FL 33063		Mailing Address 7940 NW 8TH STREET MARGATE FL 33063	
2. Principal Place of Business 6548 MARBLETREE LANE		3. Mailing Address SAME AS	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State LAKE WORTH FL		City & State NEW PLACE OF BSS	
Country 33467		Country	
Zip		Zip	
4. FEI Number 65-0673410		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FINEBERG, LIBO B ESQ. 3500 GATEWAY DRIVE STE 201 POMPANO BEACH FL 33069		7. Name and Address of New Registered Agent SAME AS	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		Zip Code FL	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title is applicable. (NOTE: Registered Agent signature required when renewing)			
FILE NOW!!! FEE IS \$550.00 DUE BY September 6, 2006 Make Check Payable to Florida Department of State		S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒	
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD APPLEMAN, SCOTT A 7940 NW 8TH STREET MARGATE FL 33063 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP APPLEMAN, JUDY 7940 NW 8TH ST MARGATE FL 33063 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V.P. DEBRA APPLEMAN 6548 MARBLETREE LANE LAKE WORTH FL 33467 ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD CONLON, PETER K 6161 NW 2ND AVE BOCA RATON FL 33487 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		7/30/2006 954-975-5875 Date Office Phone	