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

P96000049763 (1) DOCUMENT #

WESTERN GOLF OF PENSACOLA, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						{	
· ·		Mailing Address					
7711 E. GREENWAY RD. SCOTTSDALE AZ 85260		7711 E. GREENWAY RD. SCOTTSDALE AZ 85260					
GOOTTOOKLE	H2 83200	3001130ALE NZ 63200			DO NOT WRITE IN TI	HIS SPACE	
					3. Date Incorporated or Qualified 06/11/1996		
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	Applied For	
21		26		58-2247451	Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt #, etc.			\$8.75 Additional		
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23					Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the	current year Intangible	
24	25]	29	30		Personal Property Tax due June 30.	Yes No	
	g. Name and Address of Curre	nt Registered Agent		,	10. Name and Address of New Registe	red Agent	
	CORPORATION SYSTEM		B1	Name			
	00 \$O UTH PINE ISLAND ROAD		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)		
PLA	untation fl 33324						
			83		•		
			84	City		85 Zip Code	
			07	City	į	EL 85 Zip Code	
office or r	egistered agent, or both, in the State	: of Horida. Such change was au	ithorized by	zithe corno	orporation submits this statement for the purpos pration's board of directors. I hereby accept the	se of changing its registered appointment as registered	
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE							
	Signature, typed or printed name of registered as		Hegistered Ag	ont signature re	equired when reinstating) DA		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	DP 105	☐ DELETE	1.1 TITLE			Change Addition	
NAME	BLACK, JOE		1.2 NAME				
STREET ADDRESS	7711 E. GREENWAY RD.		1.3 STREET	ADDRESS			
CITY-ST-ZIP			1.4 CITY - S	T-ZIP			
TITLE	DS	L) DELETE	2.1 TITLE		DST	Change 🔀 Addition	
NAME	DICKEY, RUSSELL S.		2.2 NAME				
STREET ADDRESS	4340 N 42 AVE		2.3 STREET	ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE	TODAY TODAY		3.1 TITLE			☐ Change ☐ Addition	
NAME	DICKEY, TOD V.		3.2 NAME				
STREET ADDRESS	4340 N 42 AVE		3.3 STREET	ADDRESS			
CITY-ST-ZIP	PHOENIX AZ		3.4. CITY-	ST-ZIP			
TITLE	D	☐ DELETE	4 1 TITLE		·	Change Addition	
NAME	DICKEY, VARDE V.		4. 2 NAME	1	DICKEY, VERDE V.		
STREET ADDRESS	4340 N 42 AVE		4 3 STREET		•		
CITY-ST-ZIP	PHOENIX AZ		4 4 CITY - S	iT-ZIP			
TITLE		☐ DELETE	51 TITLE			Change Addition	
NAME			52 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S	T-ZIP			
TITLE		DELFTE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S	T - ZIP			

14. Thereby 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 trusted 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.