

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90212 046 ***150.00

DOCUMENT # P96000051096

1. Corporation Name
P & P'S HOLE IN ONE, INC.



Principal Place of Business
~~2979 LANTANA LAKES DR E~~
~~JACKSONVILLE FL 32246~~

Mailing Address
~~2979 LANTANA LAKES DR E~~
~~JACKSONVILLE FL 32246~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/13/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

7. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 625 McCOLLUM CIR

26 625 McCOLLUM CIR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 NEPTUNE BEACH FL

28 NEPTUNE BEACH FL

Zip

Country

Zip

Country

24 32266

25

USA

29 32266

30

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PITTMAN, CAROL V

~~2979 LANTANA LAKES DR E~~
~~JACKSONVILLE FL 32246~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

625 McCOLLUM CIR

83

84 City

NEPTUNE BEACH

FL

85 Zip Code

32266

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME PITTMAN, CAROL V
STREET ADDRESS 2979 LANTANA LAKES DR E
CITY-ST-ZIP JACKSONVILLE E 32246

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME PITTMAN, CAROL V.
1.3 STREET ADDRESS 625 McCOLLUM CIR
1.4 CITY-ST-ZIP NEPTUNE BEACH FL 32266

TITLE VM ☐ DELETE
NAME PHELPS, F. JANE
STREET ADDRESS 2979 LANTANA LAKES DR E
CITY-ST-ZIP JACKSONVILLE FL 32246

2.1 TITLE VM ☒ Change ☐ Addition
2.2 NAME PHELPS, F. JANE
2.3 STREET ADDRESS 625 McCOLLUM CIR
2.4 CITY-ST-ZIP NEPTUNE BEACH FL 32266

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

Carol V. Pittman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/99

Date

904 246-6683

Daytime Phone #

CR2E034 (11/98)

0041086