

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

FILED
Jul 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000089043			
1. Corporation Name KLAAS Golf Enterprises, Inc.			
Principal Place of Business 8889 Pelican Bay Blvd. #303 Naples, FL 34108		Mailing Address 8889 Pelican Bay Blvd. #303 Naples, FL 34108	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 8889 Pelican Bay Blvd. Suite, Apt. #, etc. 22 303 City & State 23 NAPLES, FL Zip 24 34108 Country 25 USA		3. Date Incorporated or Qualified 10/29/96 4. FEI Number 59-3410738 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
26 8889 Pelican Bay Blvd. Suite, Apt. #, etc. 27 303 City & State 28 NAPLES, FL Zip 29 34108 Country 30 USA		10. Name and Address of New Registered Agent 81 Name RALPH B. KLAAS 82 Street Address (P.O. Box Number is Not Acceptable) 8889 Pelican Bay Blvd. 83 Suite 303 84 City Naples FL 85 Zip Code 34108	
9. Name and Address of Current Registered Agent Pamela S. MacKie 4001 TAMiami Trail North Naples, FL 34103			
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 RALPH B. KLAAS President - KLAAS Golf Ent. Inc. 7-14-98 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE President <input type="checkbox"/> DELETE NAME RALPH B. KLAAS STREET ADDRESS 8889 Pelican Bay Blvd. #303 CITY-ST-ZIP NAPLES FL 34108		1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
TITLE Vice President <input type="checkbox"/> DELETE NAME RICHARD L. KLAAS STREET ADDRESS 8889 Pelican Bay Blvd. #303 CITY-ST-ZIP NAPLES FL 34108		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE Secretary/Treasurer <input type="checkbox"/> DELETE NAME BRIAN J. KLAAS STREET ADDRESS 8889 Pelican Bay Blvd. #303 CITY-ST-ZIP NAPLES, FL 34108		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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 in an attachment with an address.

SIGNATURE: **RALPH B. KLAAS** **President** **7/14/98** **(941) 594-0000**

CR2E034 (10/97)