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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90154 006 ***150.00

1999 DOCUMENT # P97000051572

FORE STAR GOLF, INC.

Principal Place of Business

Mailing Address

877 EXECUTIVE CENTER DRIVE WEST SUITE 303. GLADES BLDG.

877 EXECUTIVE CENTER DRIVE WEST SUITE 303. GLADES BLDG.

DO NOT WRITE IN THIS SPACE

| ST PETERSBUR | G FL 33702 | ST PETERSBURG FL 33702 | | DO NOT WRITE IN THIS S | DO NOT WRITE IN THIS SPACE | | |
|--|--|------------------------------------|-------------------------------------|---|----------------------------------|--|--|
| | | | | 3. Date incorporated or Qualifed | 3. Date incorporated or Qualifed | | |
| | | | | 06/11/1997 | | | |
| 2 Principal Pl | ace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For | | |
| 297 | W. COCOA BEACH CSWY | 797116 | DA BEACH | | Not Applicable | | |
| 21 2 / 6 | | | OH FENCH | CS207, 39-3409 100 | \$8.75 Additional | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | Fee Required | | |
| 22 | | 27 | | | | | |
| City & State | ٠ - ٠ - ٠ - ٠ - ٠ - ٠ - ٠ - ٠ - ٠ - ٠ - | City & State | <u>ب</u> | 6. Election Campaign Financing | \$5.00 May Be | | |
| 23 <u>C</u> | A BEACH TL | 28 COCOA BEAC | <u>:ለ</u> , ተረ | Trust Fund Contribution | Added to Fees | | |
| Zip | Country | Zip · | Country | 8. This corporation owes the current year Intan | | | |
| 24 <i>32</i> 9, | 36 25 USA | 29 <i>3273</i> / 30 | USA . | 1 Glacificant Top only 1 and |]Yes □No | | |
| | 9. Name and Address of Current | Registered Agent | | 10. Name and Address of New Registered Ag | gent | | |
| 81 Name C- TOS O POTET | | | | | | | |
| | | | | GEORGE H. KOPERT | | | |
| 877 EXECUTIVE CENTER DRIVE WEST 82 Street Addr | | | | Address (P.O. Box Number is Not Acceptable) | SEZUAY | | |
| SUITE 303, GLADES BLDG. | | | | IT WE COUSH DEAD! CHO- | - Line - 1 | | |
| | ETERSBURG FL 33702 | | " | | | | |
| 31 F | LICHODONG I E 33/02 | | 84 City | 0 : N | 85 Zip Code | | |
| | | | [C | COCOA DEACH FL | <u> </u> | | |
| 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 ch | nanging its registered | | |
| office or re | egistered agent, or both, in the State of | Florida Such change was auth | iorized by the corpi a Statutes. | oration's board of directors. I hereby accept the appoint | lient as 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 original Statutes. | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent a | and title if applicable. (NOTE: Re | egistered Agent signature | required when reinstating) DATE | | | |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS AND | DIRECTORS IN 12 | | |
| TITLE | PDST | DELETE | 1.1 TITLE | | Change Addition | | |
| | | | 1.2 NAME | | | | |
| NAME | ROPERT, GEORGE A | | | I com | AY | | |
| STREET ADDRESS | 530 BARRETT DRIVE | | 1.3 STREET ADDRESS | 2170.CCC | | | |
| CITY-ST-ZIP | MERRITT ISLAND FL 32952 | | 1.4 CITY-ST-ZIP | COCOA BEACH, FL 32931 | | | |
| TITLE | | ☐ DELETE | 2.1 TΠLE | 1 | ☐ Change ☐ Addition | | |
| NAME | - | | 2.2 NAME | 1 | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | 2.4 CITY-ST-ZIP | | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | 111111111111111111111111111111111111111 | Change Addition | | |
| | | | 3.2 NAME | · | | | |
| NAME | | | | | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | |
| CITY-\$T-ZIP | | | 3.4. CITY-ST-ZIP | | ☐ Change ☐ Addition | | |
| πίξΕ | | ☐ DELETE | 4.1 TITLE | | □ Alleride □ Vocition | | |
| NAME | | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition | | |
| NAME | | | 5.2 NAME | , | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | | |
| | | | 5.4 CITY-ST-ZIP | , | | | |
| CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition | | |
| TITLE | | ☐ NETE IE | I ' | | | | |
| NAME | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | | |
| | | | I | | | | |

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:

5/99 407-784-8533 Daytime Phone #

CR2E034 (11/98)