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 Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90127 038 ***150.00

DOCUMENT # P97000081717 1. Corporation Name

PAT'S GOLF CENTER, INC.

Principal Place	e of Business	M	lailing Address										
4414 DEL PRAD	OO BLVD.		14 DEL PRADO BI	LVD.			ĺ						
UNIT 5	1 00004	•	NIT 5	004				1	DO NOT WR	ITE IN THI	S SPAC	Œ	
CAPE CORAL FL 33904 US		US	CAPE CORAL FL 33904				3.0	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
US		03	,					9/22/1997	or dedilled				`
			Marina Adda					El Number			r	TAP	olied For
2. Principal Pla	lace of Business	├	. Mailing Address	S			ľ				}		
21		26					0	<u>5-0783075</u>			•		t Applicable
Suite, Apt. #	#, etc.	<u> </u>	Suite, Apt. #. et	ic.			5. C	Certificate of Stat	tus Desired			Fee Re	dditional
22		27	0. 0.0										
City & State	e	<u> </u>	City & State					lection Campai	-				May Be
23		28						rust Fund Cont				Added t	o rees
Zip	Country	<u> </u>	Zip		ountry			his corporation		rent year I		,	No
24	25	29		30				ersonal Proper		B/	Y ∐		KINO
	9. Name and Address of	of Current Regis	stered Agent		- 04	N	10. N	lame and Add	ress of New	Registere	a Agen		
A B 45-1	DILAMANED CHARTEDED	1			81	Name							
	RILAWYER CHARTERED				82	Street Add	drėss (P.C	D. Box Number	is Not Accept	able)			
	ALMERIA AVENUE												
CORA	AL GABLES FL 33134				83								
					84	City					. 85	Zip (Code
					04	City				F	L ``		
44 D	to the provisions of Sections	s 607.0502 and 6	307.1508, Florida	Statutes, the	above	-named cor	rporation s	submits this stat	tement for the	purpose	of chang	ing its	registered
→ i Pursuant t		the State of Election					tion's boar	rd of directors		ot the app	ointmen	ıtas reg	gisterea
office or re	egistered agent or both in t	the state of Flori	ida. Such change	was authoriz	ed by	the corporat			i nereby acce		0		
office or re	egistered agent, or both, in t m familiar with, and accept t	the obligations of	f, Section 607.050	was authoriz 05, Florida Si	ed by	the corporat		or directors.	r nereby acce				1
office or re agent. I ar SIGNATURE	egistered agent, or both, in t m familiar with, and accept t	the obligations of	f, Section 607.050	05, Florida Si	ed by tatutes	the corporat				DATE			
office or re agent. I as	egistered agent, or both, in in familiar with, and accept to Signature, typed or printed name of re	the obligations of	f, Section 607.050	05, Florida Si (NOTE: Registe	ed by tatutes	the corporat	ired when rein			DATE		,	RS IN 12
office or reagent. I are SIGNATURE	egistered agent, or both, in in mamiliar with, and accept the signature, typed or printed name of respective to the signature.	the obligations of	f, Section 607.050	(NOTE: Registe	red by tatutes	the corporat	ired when rein	nstating)		DATE	AND DIF	,	RS IN 12
office or reagent. I ar SIGNATURE 12.	egistered agent, or both, in in in in familiar with, and accept the signature, typed or printed name of respect to the part of	the obligations of	f, Section 607.050 of applicable ECTORS	(NOTE: Registe	red Agen 3.	the corporat	ired when rein	nstating)		DATE	AND DIF	RECTO	
office or reagent. I are SIGNATURE 12. TITLE NAME	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re-OFFI PSTD GILLIS, PATRICK	the obligations of	f, Section 607.050 of applicable ECTORS	(NOTE: Registe (NOTE: Registe 1.1.1	red Agen 3. I TITLE	the corporat	ired when rein	nstating)		DATE	AND DIF	RECTO	
office or reagent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS	(NOTE: Registe (NOTE: Registe 1.1 1.1	red Agen 3. TITLE NAME	the corporat	ired when rein	nstating)		DATE	AND DIF	RECTO	
office or reagent. I are agent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re-OFFI PSTD GILLIS, PATRICK	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS	(NOTE: Registe (NOTE: Registe 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	red Agen 3. ITITLE NAME STREET	the corporat	ired when rein	nstating)		DATE	AND DIF	RECTO	
office or reagent. I are agent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.2 1.3 1.4 2.1	red Agen 3. TITLE NAME STREET	the corporat	ired when rein	nstating)		DATE	AND DIF	RECTO	Addition
office or reagent. I are agent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.2 1.4 1.5 1.7 2.2	red Agen 3. ITTLE NAME STREET CITY-S TITLE	t signature requir	ired when rein	nstating)		DATE	AND DIF	RECTO	Addition
office or reagent. I are agent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS	(NOTE: Registe (NOTE: Registe 1 1 1 1 1 1 1 2 2 2 2 2	red Agen 3. TITLE NAME STREET TITLE NAME NAME NAME NAME	t signature requir	ired when rein	nstating)		DATE	AND DIF	RECTO	Addition
office or reagent. I are agent. I are signature. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.1 1.1 1.1 2.2 2.3 2.2	red Agen 3. TITLE NAME STREET NAME NAME STREET ACITY-ST	t signature requir	ired when rein	nstating)		DATE	AND DIF	RECTO Change	☐ Addition
office or reagent. I are agent. I are selected and select	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS	(NOTE: Registe (NOTE: Registe 1 1 1 1 1 1 2 2 2 2 ETE 3 3 4	red Agen 3. TITLE NAME STREET TITLE NAME NAME NAME NAME NAME NAME NAME NAM	t signature requir	ired when rein	nstating)		DATE	AND DIF	RECTO	Addition
office or reagent. I are agent. I are selected and a selected and	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1 1 1 1 1 1 2 2 2 2 ETE 3 3 4	red Agen 3. TITLE NAME STREET NAME NAME STREET ACITY-ST	t signature requir	ired when rein	nstating)		DATE	AND DIF	RECTO Change	☐ Addition
office or reagent. I are agent. I are selected and a selected and	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1 ETE 1.1 1.1 1.1 1.2 2.1 2.2 2.2 ETE 3.1	red Agen 3. TITLE NAME STREET TITLE NAME NAME STREET TITLE NAME STREET TITLE NAME TITLE NAME	t signature requir	ired when rein	nstating)		DATE	AND DIF	RECTO	☐ Addition
office or reagent. I are agent. I are agent. I are signature. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.2 1.2 2.2 2.2 ETE 3.3 3.3 3.3	red Agen 3. TITLE NAME STREET TITLE NAME NAME STREET TITLE NAME STREET TITLE NAME TITLE NAME	t signature requir t signature requir ADDRESS T-ZIP ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO Change Change	Addition Addition
office or reagent. I are agent. I are agent. I are selected and agent. I are selected agent. I are agent. I a	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.050 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.2 1.2 2.2 2.2 ETE 3.3 3.3 3.3	red Agen 3. TITLE NAME STREET CITY-S TITLE ACITY-S TITLE TITLE TITLE NAME STREET TITLE NAME STREET	t signature requir t signature requir ADDRESS T-ZIP ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO	☐ Addition
office or reagent. I are agent. I are selected and agent. I are selected agent. I are se	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURE OF GILLIS, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.3 1.4 1.4 1.5 2.2 2.2 ETE 3.3 3.3 3.4 ETE 4.4	red Agen red	t signature requir t signature requir ADDRESS T-ZIP ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO Change Change	Addition Addition
office or reagent. I are agent. I are agent. I are selected and agent. I are selected agent. I are selected agent. I are agent. I are selected agent. I ar	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.1 1.4 1.2 2.2 2.2 ETE 3.3 3.3 3.1 ETE 4.4	red Agent Ag	t signature requir t signature requir ADDRESS T-ZIP ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO Change Change	Addition Addition
office or reagent. I are agent. I are signature. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.3 1.4 1.5 2.2 2.2 2.2 ETE 3.3 3.3 ETE 4.4 4.4 4.4	red Agent Ag	t signature requir t signature requir t ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE		RECTO Change Change	Addition Addition Addition
office or reagent. I are agent. I are selected and a selected and	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.3 1.4 1.4 1.5 2.2 2.2 2.2 ETE 3.3 3.3 3.4 ETE 4.4 4.4 4.4	red Agen Red	t signature requir t signature requir t ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE		RECTO Change Change	Addition Addition
office or reagent. I are agent. I are signature. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.1 1.1 1.2 2.2 2.2 2.2 ETE 3.3 3.3 3.1 ETE 4.4 4.4 4.4 4.5 ETE 5.	red Agen red Agen red Agen red Agen Red	t signature requir t signature requir t ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE		RECTO Change Change	Addition Addition Addition
office or reagent. I are agent. I are agent. I are signature. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.3 1.4 1.5 2.2 2.2 2.2 ETE 3.3 3.3 3.1 ETE 4.4 4.4 4.5 ETE 5.5	red Agent Ag	t signature requir t signature requir t ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE		RECTO Change Change	Addition Addition Addition
office or reagent. I are agent. I are agent. I are signed and agent. I are street address city-st-zip title name street address street add	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.3 1.4 1.5 2.4 2.5 2.2 2.2 ETE 3.3 3.3 3.4 4.4 4.4 4.4 4.5 ETE 5.5 5.5	red Agent Ag	t signature requir t signature requir t ADDRESS T-ZIP ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE		RECTO Change Change	Addition Addition Addition
office or reagent. I are agent. I are agent. I are signature. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	G. Section 607.054 of applicable ECTORS DELI DELI DELI DELI DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.3 1.4 1.5 2.2 2.2 2.2 2.2 ETE 3.3 3.3 3.4 4.4 4.4 4.4 4.5 5.5 5.5	red Agent at the service of the serv	t signature requir t signature requir t ADDRESS T-ZIP ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO Change Change	Addition Addition Addition
office or reagent. I are agent. I are agent. I are signed and agent. I are street address city-st-zip title name street address city-st-zip title	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	f, Section 607.054 of applicable ECTORS DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.1 1.3 1.4 1.5 2.2 2.2 2.2 2.2 ETE 3.3 3.4 4.4 4.4 4.4 4.5 5.5 5.5 ETE 6.5	red Agen red Agen red Agen red Agen Red	t signature requir t signature requir t ADDRESS T-ZIP ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO Change Change Change	Addition Addition Addition Addition
office or reagent. I are agent. I are agent. I are selected and a	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	G. Section 607.054 of applicable ECTORS DELI DELI DELI DELI DELI	(NOTE: Registe (NOTE: Registe 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1.1 1	red Agent red	t signature requir t signature requir t ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO Change Change Change	Addition Addition Addition Addition
office or reagent. I are agent. I are agent. I are street address city-st-zip title name street address city-st-zip title title street address city-st-zip title	egistered agent, or both, in in m familiar with, and accept to Signature, typed or printed name of re OFFIGURES, PATRICK 4414 DEL PRADO BLV	the obligations of objective agent and title CERS AND DIRE	G. Section 607.054 of applicable ECTORS DELI DELI DELI DELI DELI	(NOTE: Registe (NOTE: Registe (NOTE: Registe 1.1 1.2 1.3 1.4 1.5 1.4 1.5 1.4 1.5 1.4 1.4 1.5 1.6 1.6 1.6 1.6 1.6 1.6 1.6 1.6 1.6 1.6	red Agent red	t signature requir t signature requir t ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP	ired when rein	nstating)		DATE	AND DIF	RECTO Change Change Change	Addition Addition Addition Addition

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 ar 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:

941-540-3889