

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0013065

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**FILED**

99 JUL 22 PM 5:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # **P97000088691**

1. Corporation Name  
**3DGOLFER, INC.**

Principal Place of Business  
**105 MARKHAM CT.  
LONGWOOD FL 32779**

Mailing Address  
**105 MARKHAM CT.  
LONGWOOD FL 32779**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**10/13/1997**

4. FEI Number **59-3512194** Applied For  
**\*APPLIED FOR** Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business  
21 **1101 Delk Road**  
Suite, Apt. #, etc.

2a. Mailing Address  
26 **1101 Delk Road**  
Suite, Apt. #, etc.

City & State  
23 **Longwood FL**

City & State  
28 **Longwood FL**

Zip Country  
24 **32779** 25 **USA**

Zip Country  
29 **32779** 30 **USA**

9. Name and Address of Current Registered Agent

**SEBASTIAN, FERD B III  
105 MARKHAM CT.  
LONGWOOD FL 32779**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1101 Delk Road**  
83  
84 City **Longwood** FL 85 Zip Code **32779**

11. Pursuant to the provisions of sections 607.0502 and 607.0508, 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 agent applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**7/15/99**

12. OFFICERS AND DIRECTORS

TITLE  
NAME **D. SEBASTIAN, FERD III** ☐ DELETE  
STREET ADDRESS **15 MARKHAM CT**  
CITY-ST-ZIP **LONGWOOD FL 32779**

TITLE  
NAME **D SEBASTIAN, JOHN** ☐ DELETE  
STREET ADDRESS **105 MARKHAM CT**  
CITY-ST-ZIP **LONGWOOD FL 32779**

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DECEASED** ☒ Change ☐ Addition  
1.2 NAME **SEBASTIAN, FERD III**  
1.3 STREET ADDRESS **1101 Delk Road**  
1.4 CITY-ST-ZIP **Longwood FL 32779**

2.1 TITLE **DECEASED** ☒ Change ☐ Addition  
2.2 NAME **SEBASTIAN, JAN L.**  
2.3 STREET ADDRESS **1101 Delk Road**  
2.4 CITY-ST-ZIP **Longwood FL 32779**

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

4.1 TITLE **100002952601178** ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS **-08/06/99--01058--018**  
4.4 CITY-ST-ZIP **\*\*\*\*558.75 \*\*\*\*558.75**

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

6.1 TITLE **TS** ☐ 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 any attachment with an address.

SIGNATURE:

**7/15/99 (401)862-3200**

CR2E034 (5/99)