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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000094827 (7)

PARSCRIPTION GOLF, INC.

FILED Apr 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 537 S.W. HAMPTON COURT 537 S.W. HAMPTON COURT PORT ST. LUCIE FL 34986 PORT ST. LUCIE FL 34986 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/05/1997 2. Principal Place of Business
21. Mailing Address
21. Mailing Address
21. Mailing Address
21. Mailing Address 4. FEI Number Applied For 65-0796812 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing LENSEN BEACH. JENSEN Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 34957 MARTIN 25 MARTIN Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SCHRADER, JAY W W. SCHRADER 537 S.W. HAMPTON COURT 82 Street Address (P.O. Box Number is Not Acceptable PORT ST. LUCIE FL 34986 83 BEACH *IEN*SEN 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 Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition SCHRADER, JAY W NAME 1.2 NAME 537 S.W. HAMPTON COURT STREET ADDRESS 1.3 STREET ADDRESS PORT ST. LUCIE FL 34986 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition SCHRADER, ANNA E NAME 2.2 NAME 537 S.W. HAMPTON COURT STREET ADDRESS 2.3 STREET ADDRESS PORT ST. LUCIE FL 34986 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE. TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY -ST-ZIP 3.4. CITY - ST - ZIP Change TITLE DELETE 4,1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change ☐ Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this timing troes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual roport or supplemental anotal 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 truefee empowered to execute this apport 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.

SIGNATURE:

<u> 561-692-7989</u>