2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000027255

1. Entity Name

TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

WALK -N- STICK GOLF CLUB, INC.



FILED Mar 12, 2007 08:00 Al Secretary of State

CR2E034 (11/05)

Applied For

\$8.75 Additional

Not Applicable

Principal Place of Business

301 BUENA VENTURA ROAD KISSIMMEE, FL 34743

Mailing Address

1749 BIG OAK LANE KISSIMMEE, FL 34746

US



No Chg-P

02202007

4. FEI Number 59-3547782

5. Certificate of Status Desired

	ree nequied
Name and Address of Current Registered Agent	
HOWER, JEFFREY 1749 BIG OAK LANE KISSIMMEE, FL 34746	DO NOT WRITE IN THIS SPACE
the obligations of registered agent. SIGNATURE	registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
Signature, types or printed neme of registered agent and title 8 applicable. (NOTE	: Registered Agent signature required when reinstating) DATE DATE
FILE NOW!!! FEE (\$ \$150.00) After May 1, 2007 Fee will be \$550.00 9. Election Campaig Trust Fund Contr	
10. OFFICERS AND DIRECTORS	
TITLE PVST NAME HOWER, JEFFREY STREET ADDRESS 1749 BIG OAK LANE CITY-ST-ZIP KISSIMMEE, FL 34746	U00000662243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	03/21/07-80005-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

16.21

IN THIS SPACE