

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000072310

1. Entity Name
PRO GOLF DISCOUNT OF SOUTHWEST FLORIDA, INC.



Principal Place of Business
24600 TAMIAMI TR SOUTH, STE
STE 500
BONITA SPRINGS, FL 34134

Mailing Address
24600 TAMIAMI TRAIL S.
STE 500
BONITA SPRINGS, FL 34134



02032005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3529417

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RIGSBY, CHRIS L
24600 TAMIAMI TR SOUTH, STE
BONITA SPRINGS, FL 34134

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RIGSBY, CHRIS L
STREET ADDRESS	24600 TAMIAMI TRAIL S. STE 500
CITY - ST - ZIP	BONITA SPRINGS, FL 34134
TITLE	DVP
NAME	RIGSBY, CAROLEE
STREET ADDRESS	24600 TAMIAMI TRAIL S. STE 500
CITY - ST - ZIP	BONITA SPRINGS, FL 34134
TITLE	DVP
NAME	RIGSBY, PHILLIP M
STREET ADDRESS	24600 TAMIAMI TRAIL S. STE 500
CITY - ST - ZIP	BONITA SPRINGS, FL 34134
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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02/12/05-80043-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Chris L Rigby* CHRIS L RIGSBY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-05

Date

(239) 947-2582

Daytime Phone #