PROFIT CORPORATION ANNUAL REPORT 1999

ATT COLOR



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000093846

1. Corporation Name

MARR GOLF, INC.

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90017 043 ***150.00



| Principal Place | of Business | Mailing Address | | | | . 18.88 11.81 1811 | |
|---|---|---------------------|-------------------------|----------------------|--|------------------------|----------------|
| 240 BAHAMA LN. 240 BAHAMA LN. | | | | | | | |
| PALM BEACH FL 33480 PALM BEACH FL 33480 | | | | | DO NOT WRITE IN THIS SPACE | | |
| | • | | | | 3. Date Incorporated or Qualifed | 3 SPACE | |
| | | | | | • | • | i |
| A 5 3 3 1 5 | | 2a. Mailing Address | | | 11/05/1998 4. FEI Number | | oplied For |
| <u> </u> | ace of Business | F | | | 22-3623682 | | ot Applicable |
| 21 26 | | | | | 12-2023682 | | Additional |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | - 5Certifcate of Status Desired | | equired |
| 27 City & State | | | | | | | |
| City & State City & State | | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | |
| 23 28 7in | | | Country | | | | TO FEES |
| Zip | Country | | Country | | 8. This corporation owes the current year In | tangible | □No |
| 24 | 25 | 29 30 | | | Personal Property Tax. 10. Name and Address of New Registered | | |
| | 9. Name and Address of Current | Registered Agent | 81 | Name | 10. Name and Address of New Registered | Agoin. | |
| MCALLISTER, BRUCE A | | | | Ivalile | | | |
| STEEL, HECTOR & DAVIS LLP | | | 82 | Street Addr | ress (P.O. Box Number is Not Acceptable) | | |
| | | | <u> </u> | <u> </u> | | | |
| 1900 PHILLIPS POINT W., 777 S. FLAGLER DR. | | | 83 | } | A STATE OF THE STA | انعران ہے ہے | · [] 11 · [] |
| PALM BEACH FL 33401 | | | 84 | City | | 85 7in | Code |
| 美国集产型。这位 | | | | <u> </u> | F | | |
| 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 | | | | | | | |
| 0,0,1, | Signature, typed or printed name of registered agent a | | | nt signature require | d when reinstating) DATE | DIDEOT. | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECTO ☐ Change | Addition |
| TITLE | D | _ | 1,1 TITLE | | | □ Change | Li Addition |
| NAME | MARR, DAVID F III | | 1.2 NAME | | | | |
| STREET ADDRESS | 240 Bahama Ln. | | 1.3 STREET | TADORESS | | | |
| CITY+ST-ZIP | | | 1.4 CITY-S | T-ZIP | | | |
| TITLE | D DELETE 2.1 TI | | 2.1 TITLE | | | ☐ Change | ☐ Addition |
| NAME | HALLAS, ELIZABETH | : | 2,2 NAME | | | | 1 |
| STREET ADDRESS | 240 BAHAMA LN. | 4: | 2,3 STREET | T ADDRESS | | | |
| CITY-ST-ZIP | -PALM-BEACH FL 33480 | والمعاشمين والمرايد | 2.14 CITY-15 | ST-ZIP | | | |
| TITLE | D | ☐ DELETE | 3.1 TITLE | | • | Change | ☐ Addition |
| NAME . | MARR, ANTHONY | <u>,</u> | 3.2 NAME | | | | ļ |
| STREET ADDRESS | 240 BAHAMA LN. | | 3.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | PALM BEACH FL 33480 | I | 3.4. CITY-S | ST-ZIP | | | |
| TITLE | | | 4.1 TITLE | | | Change | ☐ Addition |
| NAME | | • | 4, 2 NAME | | | | |
| STREET ADDRESS | | | | TADDRESS | | | 1 |
| 1 | | 4 | 4.4 CITY-S | | | | } |
| CITY-ST-ZIP TITLE | | | 4.4 CITT-S 5.1 TITLE | 11-21 | | Change | Addition |
| | | | 5.2 NAME | ! | | J | _ |
| NAME | · | | | TADDRESS | | | \ |
| STREET ADDRESS | | | 5.4 CITY-S | | | | ļ |
| CITY-ST-ZIP | | | 6.4 TITLE | 11-41 | | [] Change | Addition |
| TITLE | | | | | | CT counties | |
| NAME | CONTROL OF THE STATE | | 6.2 NAME | | | | 1 |
| STREET ADDRESS | १९३८ । च्या १५५५ १ अस्त अस्टर्स्य स्थापन | 175 Set 178 | | TADORESS | | | |
| CITY-ST-ZIP CO. | Level 1 and | L. | 6.4 CITY-S | T-ZIP | | | Į |

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 an attachment with an address, with all other like empowered.

CITY-ST-ZIP Out