2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000055694 Mar 14, 2001 8:00 am **Secretary of State** THE NINETEENTH HOLER'S INVESTMENT CLUB, INC. 03-14-2001 90492 016 ***150.00 Principal Place of Business Mailing Address 2303 N.E. 35TH DRIVE 2303 N.E. 35TH DRIVE FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 65-0927749 City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DODDO DARNELL ---Street Address (P.Q. Box Number is Not Acceptable) 9899 N.W. 39TH ST. HOLLYWOOD FL 33024 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS -ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROBY, DIANA L NAME 9267 CHELSEA DRIVE N STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition VICKO, PAMELA M NAME 2303 NE 35 DRIVE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33308 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition THOMAS, SYLVIA NAME NAME 11960 SW 78 COURT STREET ADDRESS STREET ADDRESS DAVIE FL 33325 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MARTIN, DOROTHY NAME NAME **5920 BANYAN TERRACE** STREET ADDRESS STREET ADDRESS PLANTATION FL 33317 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NORCERINI, MONICA NAME NAME 9331, SEA TURTLE MANOR STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 CITY-ST-7IB CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition PIZZI, KRIS NAME NAME 514 SOLAR ISLE DRIVE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like impowered.

ARNELL DODDO 3-11-01 954-764-1048

SIGNATURE: ____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Daytime Pho