

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000055694

FILED  
Feb 26, 2004  
Secretary of State

**Entity Name:** THE NINETEENTH HOLER'S INVESTMENT CLUB, INC.

**Current Principal Place of Business:**

9267 CHELSEA DRIVE  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

9267 CHELSEA DRIVE  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 65-0927749

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROLAY, DIANA  
9267 CHELSEA DRIVE  
PLANTATION, FL 33324

**Name and Address of New Registered Agent:**

ROBY, DIANA  
9267 CHELSEA DRIVE  
PLANTATION, FL 33324

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: DIANA L ROBY

02/26/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: ROBY, DIANA L  
Address: 9267 CHELSEA DRIVE N  
City-St-Zip: PLANTATION, FL 33324

Title: S ( ) Delete  
Name: THOMAS, SYLVIA  
Address: 11960 SW 78 COURT  
City-St-Zip: DAVIE, FL 33325

Title: P ( ) Delete  
Name: NORCERINI, MONICA  
Address: 9331 SEA TURTLE MANOR  
City-St-Zip: PLANTATION, FL 33324

Title: VP ( ) Delete  
Name: DODDO, DARNELL  
Address: 9899 NW 39TH STREET  
City-St-Zip: HOLLYWOOD, FL 33024

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA L ROBY

T

02/26/2004

Electronic Signature of Signing Officer or Director

Date