

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000057421

FILED
Mar 12, 2005
Secretary of State

Entity Name: TAMPA GOLF RANGE AND LEARNING CENTER INC.

Current Principal Place of Business:

2508 NO. LAKEVIEW DR.
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

424 WINTER ST
HOLLISTON, MA 01746

New Mailing Address:

FEI Number: 59-3584545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, PHILIP A
4603 GULFWINDS DR
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

COLE, PHILIP A
15203 OCTAVIA LANE
ODESSA, FL 33556 US

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:

03/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLE, PHILIP A
Address: 4603 GULFWINDS DR
City-St-Zip: LUTZ, FL 33549

Title: T () Delete
Name: COLE, KENNETH M SR
Address: 424 WINTER ST
City-St-Zip: HOLLISTON, MA 01746

Title: S () Delete
Name: COLE, SANDRA R
Address: 424 WINTER ST
City-St-Zip: HOLLISTON, MA 01746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COLE, PHILIP A
Address: 15203 OCTAVIA LANE
City-St-Zip: ODESSA, FL 33556

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

Title: S (X) Change () Addition
Name: COLE, SANDRA R
Address: 16510 LAKE HEATHER DRIVE
City-St-Zip: TAMPA, FL 33618

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: KENNETH M. COLE SR

T

03/12/2005

Electronic Signature of Signing Officer or Director

Date