2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address

SIGNATURE:

all other like empowered.

RINTED NAME OF SIGNING OFFICER O

May 20, 2005 08:00 AM **DOCUMENT # P99000062062 Secretary of State** Entity Name MCSCOT GOLF, INC. Principal Place of Business Mailing Address 414 MORNING GLORY DR. 414 MORNING GLORY DR. LAKE MARY, FL 32746 LAKE MARY, FL 32746 05182005 No Chg-P GR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3652075 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCCLURG, THOMAS DO NOT WRITE 414 MORNING GLORY DRIVE LAKE MARY, FL 32746 IN THIS SPACE 5. 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 9. Election Campalon Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS MLE PTS NAME MCCLURG, THOMAS B STREET ADDRESS 414 MORNING GLORY DR. CRY-ST-ZIP LAKE MARY, FL 32746 U00000367718 TITLE 05/20/05-80002-010 150.00 NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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

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