
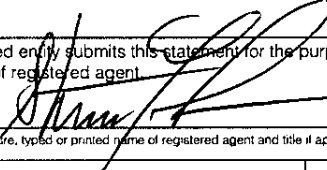
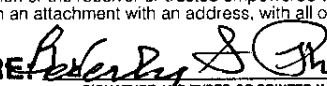


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-24-2004 90030 044 ***150.00

DOCUMENT # S11528 1. Entity Name MANATEE GOLF, INC.			
Principal Place of Business 3908 MANATEE AVENUE WEST BRADENTON, FL 34205		Mailing Address 3908 MANATEE AVENUE WEST BRADENTON, FL 34205	
2. Principal Place of Business 4001 Manatee Ave. W. Suite, Apt. #, etc.		3. Mailing Address 4001 Manatee Ave. W. Suite, Apt. #, etc.	
City & State Bradenton FL Zip Country 34205-1716		City & State Bradenton FL Zip Country 34205-1716	
4. FEI Number 65-0225501		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHUCK, W. DONALD 408 53RD AVE W BRADENTON, FL 34207		7. Name and Address of New Registered Agent Name STEVEN E. JOHNSON, EA Street Address (P.O. Box Number is Not Acceptable) JOHNSON FINANCIAL SERVICES, INC. 239 301 BLVD. E., SUITE F City Bradenton FL Zip Code 34208-4430	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>		STEVEN E. JOHNSON, EA <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete SMITH, GEORGE T. 5060 18TH AVE W BRADENTON, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete TATRO, LAWRENCE A. 3618 75TH AVE TER E SARASOTA, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PHELPS, BEVERLY 7782 EAGLE CREEK DRIVE SARASOTA, FL 34243	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Beverly S. Phelps 3-3-04 941-7466168 <small>Date Daytime Phone #</small>	

94035207



02262004 Chg-P CR2E034 (10/03)