

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

55 MAY -1 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V25793

(3)

1. Corporation Name

GOLF CENTRAL, INC.

Principal Place of Business

2209 S. ATLANTIC AVENUE
DAYTONA BEACH FL 32118

Mailing Address

2209 S. ATLANTIC AVENUE
DAYTONA BEACH FL 32118

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

2a. Mailing Address

26

3. Date incorporated or qualified

04/02/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3118941

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under § 193.032,
Florida Statutes. ☐ Yes ☒ No

State, Apt. #, etc.

22

State, Apt. #, etc.

27

City & State

23

City & State

28

Zip

Country

24

25

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAZEMORE, J.L.
2209 S. ATLANTIC AVENUE
DAYTONA BEACH FL 32118

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. Therefore, I sign this appointment as registered agent. I am aware of and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

W. B. Galt, Commissioner

(Print Name of Registered Agent, if not the same as that of the corporation)

4/29/95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D
2. NAME	BAZEMORE, J.L.
3. STREET ADDRESS	2209 S. ATLANTIC AVE.
4. CITY, ST. ZIP	DAYTONA BEACH FL
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST. ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST. ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST. ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST. ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST. ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST. ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST. ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST. ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST. ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193.032, Florida Statutes. Further, I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that the corporation shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the registered agent of the corporation as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report or as an attachment with an address.

SIGNATURE:

W. B. Galt, Commissioner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/95

904-255-0735