

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
May 16 1997 8:00am  
Secretary of State

DOCUMENT # V34175 (2)  
1. Corporation Name  
HOLE-IN-ONE GOLF LESSONS, INC.



Principal Place of Business  
5400 26TH STREET WEST  
#H123  
BRADENTON FL 34207

Mailing Address  
5400 26TH STREET WEST  
#H123  
BRADENTON FL 34207-3132

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/04/1992	3a. Date of Last Report 06/07/1996
21 101 Cortez Rd W	26 101 Cortez Rd W			4. FEI Number 65-0331089	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
22 City & State Bradenton FL	27 City & State Bradenton FL			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23 Zip 34207	28 Zip 34207	24 Country USA	30 Country USA	6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GALLEGOS, JAMES EDWARD 5400 26TH STREET WEST #E73 BRADENTON FL 34207		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 607.0502 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 the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *James Gallegos* (NOTE: Registered Agent signature required when reinstating) DATE 4/30/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PDM	<input type="checkbox"/> DELETE	1.1 TITLE PDM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GALLEGOS, JAMES		1.2 NAME Gallegos, James	
STREET ADDRESS 5400 26 ST. W. #H123		1.3 STREET ADDRESS 101 Cortez Rd W - C	
CITY-ST-ZIP BRADENTON FL 34207		1.4 CITY-ST-ZIP Bradenton FL 34207	
TITLE V	<input type="checkbox"/> DELETE	2.1 TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MOORE, CLAYTON		2.2 NAME moore, Clayton	
STREET ADDRESS 4503 3RD STREET CIR. W, #265		2.3 STREET ADDRESS 2909 47th Ave W	
CITY-ST-ZIP BRADENTON FL 34207		2.4 CITY-ST-ZIP Bradenton, FL 34207	
TITLE S	<input type="checkbox"/> DELETE	3.1 TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GALLEGOS, SANDRA		3.2 NAME Gallegos, Sandra	
STREET ADDRESS 5400 26TH ST. W, #H123		3.3 STREET ADDRESS 101 Cortez Rd W - C	
CITY-ST-ZIP BRADENTON FL 34207		3.4 CITY-ST-ZIP Bradenton, FL 34207	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME John T Trommer	
STREET ADDRESS		4.3 STREET ADDRESS 101 Cortez Rd W	
CITY-ST-ZIP		4.4 CITY-ST-ZIP Bradenton FL 34207	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James Gallegos* REQUIRED DATE 4/30/97 DAYTIME PHONE # 941-739-9002

CR2E034 (9/96)