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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V57052

(5)

FILED						
Apr 10 1997 8:00am						
Secretary of State						

GOLFER'S PARADISE, INC. Principal Place of Business Mailing Address 15307 AMBERTY DRIVE 15307 AMBERTY DRIVE SUITE 122 SUITE 122 TAMPA FL 33647 TAMPA FL 33647-2144 US				3. Date Incorporated or Qualified 38. Date of Last Report	
				08/10/1992	05/01/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /530	7 Amberly DR		berly pr	NOT APPLICABLE	Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 State City & State		27 Scute 122_ City & State		6. Election Campaign Financing	······································
	npa FL	28 TAMPA	FL	Trust Fund Contribution	\$5.00 May Be Added to Fees
ZIP 24 336		29 33647	Country 30 USA	8. This corporation has liability for in Florida Statutes	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	Istered Agent
1530 SUIT	t, Marlo M 7 amberty drive E 122 Pa Fl 33847		82 Street Addre 15307	AST, MARLS M ess (P.O. Box Number is Not Acceptable Amberly Dr #1	e) 22
			84 City	mpa	FL 85 Zip Code 33647
SIGNATURE	Soperhase Expest or perfect names of registered age:	and title Lappicable. (NC)	VE Registered Agent signature require	on's board of directors, I hereby accept ad when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
THE	PVST	☐ DELETE	1.1 TITLE		Change Addition
NAME	MAST, MARLO M 15307 AMBERTY DRIVE #122		1.2 NAME		
STREET ADORESS COV-ST-202	TAMPA FL		1.3 STREET ADDRESS 1.4 CITY - ST- ZIP		
THE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
COLY - S1 - 7IP		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAMI		open	3.1 RILE 3.2 NAME		FI SHOULD
STREET ADORESS			3.3 STREET ADDRESS		
CHY-ST-7H			3.4. CITY - ST - ZIP		
THEF		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
DOTY - ST - ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		The second secon
STREET ADDRESS			5.3 STREET ADDRESS		
City-\$1-76			5.4 CITY - ST - ZIP		
THEF		☐ DELETE	61 TITLE		Change Addition
NAM€			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-S1-7IP 14. Lido hereb	w curtify that the information supplied	with this filing does not aug	6.4 CITY-ST-ZIP	in Section 119.07(3)(i), Florida Statutes	Lifurther certify that the
information Lam an of	n indicated on this annual report or si	ipplemental annual report is The receiver or trustee empo	true and accurate and that wered to execute this report	my signature shall have the same legal as required by Chapter 607, Florida St	effect as if made under oath; that

SIGNATURE:

Marlo M DO STATE OF STATE OF STATE OF DIRECTOR

813-949-0551