

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V61609 (6)

1. Corporation Name
GOLF RENTALS, INC.



Principal Place of Business

3507 SOUTHSIDE BLVD.
JACKSONVILLE FL 32246

Mailing Address

3507 SOUTHSIDE BLVD.
JACKSONVILLE FL 32246

3. Date Incorporated or Qualified
09/03/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number
59-3142464

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 s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SOLEM, SCOTT R
7931 BISHOP LAKE ROAD N
JACKSONVILLE FL 32256

10. Name and Address of New Registered Agent

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 607.0302 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, and a 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Scott R. Solem

4/30/96

By the Registered Agent (Signature required when registering)

Date

12. OFFICERS AND DIRECTORS

TITLE P
NAME SOLEM, ROBERT O ☒ DELETE
STREET ADDRESS 644 S. STONEY POINT ROAD
CITY-ST-ZIP SUTTONS BAY MI 49682

TITLE V
NAME SOLEM, SCOTT R ☐ DELETE
STREET ADDRESS 7931 BISHOP LAKE RD. N.
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE
NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS

14 CITY-ST-ZIP
15 CITY-ST-ZIP

21 TITLE
22 NAME ☒ Change ☐ Addition

23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME ☐ Change ☒ Addition

33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Tommy L. Solem
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

(904) 641-5334

CR2E034 (12/95)