

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P37518** (8)

1. Corporation Name
CALGOLF, INC.



Principal Place of Business
**55 SOUTH PARK STREET
MONTCLAIR NJ 07042**

Mailing Address
**55 SOUTH PARK STREET
MONTCLAIR NJ 07042**

21	2. Principal Place of Business	26	2a. Mailing Address
22	State, Apt. #, etc.	27	State, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Zip
25	Country	30	Country

3.	Date Incorporated or Qualified	3a.	Date of Last Report
	02/17/1992		02/03/1995
4.	FET Number	Applied For	
	22-2266695	Not Applicable	
5.	Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MORRISON, RICHARD W. LEONARD & MORRISON, ATTORNEYS AT LAW 4875 NORTH FEDERAL HIGHWAY, 10TH FLOOR FORT LAUDERDALE FL 33308				81.	Name		
				82.	Street Address (P.O. Box Number is Not Acceptable)		
				83.			
				84.	City	FL	85.

11. Pursuant to the provisions of Sections 607.0532 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 607.0509, Florida Statutes.

SIGNATURE		Signature of Registered Agent	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
CP	JONES, REES		
10 BELLECLAIRE PLACE			
MONTCLAIR NJ			
DS	JONES, SUSAN		
10 BELLECLAIRE PLACE			
MONTCLAIR NJ			
T	MCDONOUGH, CATHY		
9 KENSINGTON TERRACE		119 Coleman Ave	
MAPLEWOOD NJ		Chatham, N.J 07928	

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: *Cathy McDonough* *Cathy McDonough* 1/17/96 201-744-4031
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)