

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000020733

1. Entity Name
MBGCO, LLC



Principal Place of Business
8390 CHAMPIONS GATE BLVD., STE 200
CHAMPIONS GATE, FL 33896

Mailing Address
8390 CHAMPIONS GATE BLVD., STE 200
CHAMPIONS GATE, FL 33896



01102005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-2073898	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MEADOWBROOK GOLF GROUP, INC. 8390 CHAMPIONSGATE BLVD., STE. 200 CHAMPIONSGATE, FL 33896
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JACKSON, RON E 8390 CHAMPIONSGATE BLVD., STE. 200 CHAMPIONSGATE, FL 33896
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SELLERS, CALVIN C III 8390 CHAMPIONSGATE BLVD., STE. 200 CHAMPIONSGATE, FL 33896
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ROSENSTEIN, ARNOLD 8390 CHAMPIONSGATE BLVD., STE. 200 BEVERLY HILLS, CA 90210
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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01/25/05-80109-003 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Calvin C. Sellers III Calvin C. Sellers III 1/11/05 (407)589-7200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #