

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000005444

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** BILLY CASPER GOLF, LLC

**Current Principal Place of Business:**

8300 BOONE BLVD.  
SUITE 350  
VIENNA, VA 22182

**New Principal Place of Business:**

**Current Mailing Address:**

8300 BOONE BLVD.  
SUITE 350  
VIENNA, VA 22182

**New Mailing Address:**

**FEI Number:** 86-1092316

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** BILLY CASPER GOLF MANAGEMENT, INC  
**Address:** 8300 BOONE BLVD., SUITE 350  
**City-St-Zip:** VIENNA, VA 22182

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: PETER M. HILL

MBR

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date