

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000145523

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** TROON GOLF COURSE DESIGN, INC.

**Current Principal Place of Business:**

218 E. AUGUSTA PLACE  
GREENVILLE, SC 296051004 US

**New Principal Place of Business:**

**Current Mailing Address:**

218 E. AUGUSTA PLACE  
GREENVILLE, SC 296051004 US

**New Mailing Address:**

FEI Number: 65-1262724

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ACCOUNTING TAX & FINANCIAL SERVICES INC  
510 MARCUM ROAD  
LAKELAND, FL 33809 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: MCFARLANE, STEVEN G  
Address: 218 E AUGUSTA PLACE  
City-St-Zip: GREENVILLE, SC 296051004 US

Title: VP  
Name: MCFARLANE, DANIELLE D  
Address: 218 E AUGUSTA PLACE  
City-St-Zip: GREENVILLE, SC 296051004 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN MCFARLANE

PRES

03/31/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date