

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000079184

Entity Name: MEDALIST GOLF TOUR LLC

Current Principal Place of Business:

705 BAYVIEW CT
MELBOURNE, FL 32940

Current Mailing Address:

705 BAYVIEW CT
MELBOURNE, FL 32940 US

FEI Number: 25-0751796

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARUSO, STEVEN
486 N HARBOR CITY BLVD
MELBOURNE, FL 32935 US

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

Authorized Person(s) Detail :

Title MGRM
Name FORD, STEPHEN
Address 705 BAYVIEW CT
City-State-Zip: MELBOURNE FL 32940

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN FORD

MANAGER

03/31/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date