


**2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008**

**FILED
Mar 07, 2008 08:00 AM
Secretary of State**

DOCUMENT # A27168 1. Entity Name CORAL CAY ADVENTURE GOLF, LTD.	
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Principal Place of Business 2205 E. TAMiami TRAIL NAPLES, FL 34112	Mailing Address P.O. BOX 189 TRAVERSE CITY, MI 49685
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01222008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0072411	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KOSTRZEWA, JOSEPH G
2205 E. TAMiami TRAIL
NAPLES, FL 34112

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 _____
Signature, typed or printed name of registered agent and title if applicable.

000000851726
~~03-25-08 000000005 500.00~~
DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	J83929 F.C. MANAGEMENT CORP. 123 EAST FRONT STREET TRAVERSE CITY, MI
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:  JOSEPH G. KOSTRZEWA, CHAIRMAN F.C. MGT. CORP. 3/4/08 231-929-4466

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #