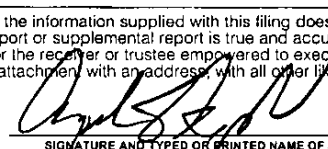


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90363 044 ****61.25

DOCUMENT # F02000001105					
1. Entity Name CLUBCORP CHARITIES, INC.					
Principal Place of Business 3030 LBJ FREEWAY, DALLAS, TX 75234			Mailing Address 3030 LBJ FREEWAY, % TAX DEPT DALLAS, TX 75234		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 75-2754798	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS			
TITLE PD	NAME GORE, FRANK C	☒ Delete	TITLE P	NAME ERIC AFFELDT	☒ Change ☐ Addition
STREET ADDRESS 3030 LBJ FREEWAY, SUITE 700	CITY - ST - ZIP DALLAS, TX 75234		STREET ADDRESS 3030 LBJ FRWY.	CITY - ST - ZIP DALLAS, TX. 75234	
TITLE VD	NAME HOWE, DOUGLAS T	☐ Delete	TITLE S	NAME RAND HUGUELY	☐ Change ☐ Addition
STREET ADDRESS 3030 LBJ FREEWAY, SUITE 700	CITY - ST - ZIP DALLAS, TX 75234		STREET ADDRESS 3030 LBJ FRWY.	CITY - ST - ZIP DALLAS, TX. 75234	
TITLE 	NAME 	☐ Delete	TITLE T	NAME ANGELA STEPHENS	☒ Change ☐ Addition
STREET ADDRESS 	CITY - ST - ZIP 		STREET ADDRESS 3030 LBJ FRWY.	CITY - ST - ZIP DALLAS, TX. 75234	
TITLE 	NAME 	☐ Delete	TITLE 	NAME 	☐ Change ☐ Addition
STREET ADDRESS 	CITY - ST - ZIP 		STREET ADDRESS 	CITY - ST - ZIP 	
TITLE 	NAME 	☐ Delete	TITLE 	NAME 	☐ Change ☐ Addition
STREET ADDRESS 	CITY - ST - ZIP 		STREET ADDRESS 	CITY - ST - ZIP 	
12. 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 or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  ANGELA STEPHENS 2-13-08 972-243-6191					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					