

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000477

FILED
Jan 19, 2009
Secretary of State

Entity Name: FRANKLIN GOLF MANAGEMENT, LLC

Current Principal Place of Business:

7000 OAKHURST LANE
CLARKSTON, MI 48348

New Principal Place of Business:

Current Mailing Address:

7000 OAKHURST LANE
CLARKSTON, MI 48348

New Mailing Address:

FEI Number: 65-0985869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 PINE ISLAND RD
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 () Delete
Name: VALASSIS, D. CRAIG
Address: 3955 PINNACLE CT.
City-St-Zip: AUBURN HILLS, MI 48326

Title: MGRM () Delete
Name: HORN, DEAN B
Address: 4779 OAKHURST RIDGE RD
City-St-Zip: CLARKSTON, MI 48348

Title: MGRM () Delete
Name: CHERNEY, ED
Address: 3955 PINNACLE CT
City-St-Zip: AUBURN HILLS, MI 48326

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VALASSIS, D. CRAIG
Address: 7000 OAKHURST LANE
City-St-Zip: CLARKSTON, MI 48348

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: CHERNEY, ED
Address: 7000 OAKHURST LANE
City-St-Zip: CLARKSTON, MI 48348

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DEAN B. HORN

MGR

01/19/2009

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