

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000004152

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** REACT GOLF, LLC

**Current Principal Place of Business:**

375 FORSGATE DRIVE  
MONROE TOWNSHIP, NJ 08831

**New Principal Place of Business:**

**Current Mailing Address:**

375 FORSGATE DRIVE  
MONROE TOWNSHIP, NJ 08831

**New Mailing Address:**

**FEI Number:** 22-3721148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAY, DWAYNE ESQ.  
201 EAST PINE ST  
SUITE 500  
ORLANDO, FL 32801 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:** MGR  
**Name:** SCHIAVONE, CHRISTOPHER  
**Address:** 375 FORSGATE DRIVE  
**City-St-Zip:** MONROE TOWNSHIP, NJ 08831

**Title:** VP  
**Name:** GALVIN, MATTHEW  
**Address:** 375 FORSGATE DRIVE  
**City-St-Zip:** MONROE TOWNSHIP, NJ 08831

I hereby 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:** MATTHEW GALVIN

VP

01/05/2012

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