

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000009587

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** CLUB CONSULTANTS LLC

**Current Principal Place of Business:**

500 MISTY PINES CIRCLE, #202  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

500 MISTY PINES CIRCLE, #202  
NAPLES, FL 34105

**New Mailing Address:**

**FEI Number:** 65-1030088

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WERNERSBACK, WILLIAM F  
1800 N. 42 AVE.  
HOLLYWOOD, FL 33021 US

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

WERNERSBACK, WILLIAM F  
1800 NORTH 42ND AVENUE  
HOLLYWOOD, FL 33021 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: \_\_\_\_\_

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WERNERSBACK, WILLIAM F  
Address: 1800 NORTH 42ND AVENUE  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM  
Name: TURNER, STACIA A  
Address: 500 MISTY PINES CIRCLE, #202  
City-St-Zip: NAPLES, FL 34105

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: WILLIAM F. WERNERSBACK

MGRM

02/16/2010

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