2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003849

Entity Name: ST. JOHNS BLUFF GOLF, L.L.C.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2205 ST. JOHNS BLUFF ROAD C/O FRED AKEL JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

PO BOX 51441 C/O FRED AKEL JACKSONVILLE BCH., FL 32240

FEI Number: 59-3713287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AKEL, FRED A 2205 ST. JOHNS BLUFF RD. JACKSONVILLE, FL 32246 US

MANAGING MEMBERS/MANAGERS:

MGR

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

Electronic eighatare of registered rigent

() Delete

ADDITIONS/CHANGES:

(X) Change () Addition

Name: AKEL, FRED A Address: AKEL, FRED A Address: AKEL, FRED A Address: 301 SAN JUAN DR.

City-St-Zip: JACKSONVILLE, FL 32246 US City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: AKEL, ALICE S MGRM Name: AKEL, ALICE S MGRM Address: 2205 ST. JOHNS BLUFF RD Address: 301 SAN JUAN DR.

City-St-Zip: JACKSONVILLE,, FL 32246 US City-St-Zip: PONTE VEDRA BEACH, FL 32246 US

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: ALICE S. AKEL MGRM 04/28/2008