

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90015 021 ***138.75

DOCUMENT # L01000020950

1. Entity Name
INTERNATIONAL CLUB SUPPLIERS, LLC



Principal Place of Business
18302 HIGHWOODS PRESERVE PARKWAY
STE 300
TAMPA, FL 33647

Mailing Address
18302 HIGHWOODS PRESERVE PARKWAY
STE 300
TAMPA, FL 33647

60039780



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04092008

Chg-LLC

CR2E083 (12/06)

City & State

City & State

4. FEI Number

59-3757205

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SARTAIN, JAMES K
18302 HIGHWOODS PRESERVE PARKWAY
STE 300
TAMPA, FL 33647

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-21-08

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete
NAME SARTAIN, JAMES K
STREET ADDRESS 18302 HIGHWOODS PRESERVE PARKWAY, STE. 300
CITY-ST-ZIP TAMPA, FL 33647

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME BAILEY, JAMES
STREET ADDRESS 18302 HIGHWOODS PRESERVE PARKWAY, STE. 300
CITY-ST-ZIP TAMPA, FL 33647

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME SARTAIN, CHAD
STREET ADDRESS 18302 HIGHWOODS PRESERVE PARKWAY, STE. 300
CITY-ST-ZIP TAMPA, FL 33647

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☒ Delete
NAME ROENISBERGER, RICK
STREET ADDRESS 1301 AVENUE OF AMERICA 38TH FL
CITY-ST-ZIP NEW YORK, NY 10019

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☒ Delete
NAME PICACHE, KEN
STREET ADDRESS 1301 AVENUE OF AMERICA 38TH FL
CITY-ST-ZIP NEW YORK, NY 10019

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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 is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-21-08 813-558-9004