2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000004572

1. Entity Name

TROON PROCUREMENT SERVICES, LLC



Apr 25, 2008 08:00 AN Secretary of State

FILED

Principal Place of Business

Mailing Address

15044 N. SCOTTSDALE RD., STE. 300 SCOTTSDALE, AZ 85254

15044 N. SCOTTSDALE RD., STE. 300 SCOTTSDALE, AZ 85254



04152008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number		Applied For
	45-046838 <u>1</u>		Not Applicable
5.	Certificate of Status Desired	\$5.00	Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

DO NOT WRITE IN THIS SPACE

4-18-08

Date

480-606-1000

Daylime Phone #

	named onlity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, a	nd accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and bite if applicable	(NOTE: Registered Agent signature required when reinstating) DATE	
	: NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TROON PUERTO RICO, INC. 15044 N. SCOTTSDALE RD., SUITE 300 SCOTTSDALE, AZ 85254	U00000921323 05/15/08-80002-005 138	. 75
TITLE NAME STREET ADDRESS CHY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		•	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		·	

11. I hereby certify that the information supplied with this filling 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.

ANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

TIMOTHY S. SCHENGEZ