2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# L03000020446

Entity Name: ST. AUGUSTINE SHORES GOLF, LLC

Current Principal Place of Business:

707 SHORES BLVD
ST AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

707 SHORES BLVD
ST AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 33-1061045 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PULLEN, MIKE
180 FONSECA DRIVE
ST. AUGUSTINE, FL 32086 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: MGRM ( ) Delete
Name: PULLEN, JOHN M PRES
Address: 180 FONSECA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: MGR ( ) Delete
Name: JONES, JOHN R JR
Address: 14485 CHINESE ELM DRIVE
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PULLEN, JOHN M II
Address: 180 FONSECA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MIKE PULLEN MGRM 04/28/2008

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