

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021708

Entity Name: A GOLDEN EXPERIENCE, LLC

FILED
Jan 17, 2007
Secretary of State

Current Principal Place of Business:

505 W. NEW YORK AVE
#8
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

505 W. NEW YORK AVE
#8
DELAND, FL 32724

New Mailing Address:

FEI Number: 54-2114665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COOK, RICHARD R
505 E. NEW YORK AVE.
STE 8
DELAND, FL 32724 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: RICE, ANDREW
Address: 840 W. NEW YORK AVE, STE. D
City-St-Zip: DELAND, FL 32720

Title: MGRM () Delete
Name: YORK-RICE, CORINNA
Address: 840 W. NEW YORK AVE, STE. D
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CORINNA YORK-RICE

MGRM

01/17/2007

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