2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000030345

1. Entity Name
AZINGER GOLF GROUP, LLC



FILED
Jan 17, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

7280 N. LEEWYNN DR. SARASOTA, FL 34240

7280 N. LEEWYNN DR. SARASOTA, FL. 34240



01102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 11-3717125 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6	Name and	Addrage	of Current	Registered Agent
v.	Maine and	MUUIUSS	OI CULIENT	Vedisien waeur

HOPSTETTER, DAVID P 1023 MANATEE AVENUE WEST BRADENTON, FL 34205

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8.	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 fam	liar with, and acce	ρt
	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

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS			
NAME STREET ADDRESS CITY-SI-ZIP	MGR ALL IN GOLF, INC. 7280 N. LEEWYNN SARASOTA, FL 34240			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY+ST+ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZiP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

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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.

SIGNATURE:

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

Keith Page

1.10.07 941.737-912

Daytime Phone #