2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000032604

1. Entity Name
RED TAIL GOLF CLUB, L.L.C.

FILED May 01, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

26026 MEMBER LANE SORRENTO, FL 32776 26026 MEMBER LANE SORRENTO, FL 32776



04262007 No Chg-LLC

CR2E083 (11/05)

| 4. | FEI Number 33-1102705 | | Applied For Not Applicable |
|----|-------------------------------|-------------------|-------------------------------|
| 5, | Certificate of Status Desired | \$5.00 Fee Rec | Additional |

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROECKER, PAUL ESQ 1275 LAKE HEATHROW LANE LAKE MARY, FL 32746

DO NOT WRITE IN THIS SPACE

| the obligat | e named entity submits this statement for the purpose of char ations of registered agent. | nging its registered office or registered agent, or bo | oth, in the State of Florida. I am familiar with, and accept |
|------------------------|----------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------|
| SIGNATURE. | Signature, typed or printed name of registered agent and title if applicable, | (NOTE: Registered Agent signature required when reinstating) | DATE |
| F | filing Fee is \$50.00 Due by May 1, 2007 | | |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TITLE | MGRM | | |
| NAME | 46/46A, LLC | | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | HEATHROW, FL 32746 | | |
| TITLE | | | |
| NAME | 1 | | UQ0000751896 |
| STREET ADDRESS | | | 05/18/07~80120-018 50.00 |
| CITY-ST-ZIP | | | 40, 10, 4, 00150 010 00100 |
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| NAME STREET ADDRESS | İ | Ì | |
| CITY-ST-ZIP | | I DO | NOT WRITE |
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| TITLE | | | |
| NAME | | | |
| STREET ADDRESS | | | |

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

4/27/07

407 3331400

Daytime Phone #