

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 30, 2006  
Secretary of State**

DOCUMENT# L05000002730

Entity Name: GOLF RETAIL STRATEGIES, LLC

**Current Principal Place of Business:**

737 MAIN STREET  
#201  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

**Current Mailing Address:**

737 MAIN STREET  
#201  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

FEI Number: 20-2060436      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CODY, JOHN L  
737 MAIN STREET  
#201  
SAFETY HARBOR, FL 34695 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: WHITE, WILLIAM D  
Address: 505 HUMPHRIES ROAD  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGRM ( ) Delete  
Name: WHEARY, THOMAS M  
Address: P O BOX 92463  
City-St-Zip: LAKELAND, FL 33804

**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: WILLIAM D WHITE

MGRM

04/30/2006

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