2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000040401 1. Entity Name SEA PINES GOLF & COUNTRY CLUB, L.C. Principal Place of Business Mailing Address 2901 W. BUSCH BOULEVARD 2901 W. BUSCH BOULEVARD #901 #901 TAMPA, FL 33618 TAMPA, FL 33618

FILED Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90022 039 ***143.75

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CR2E083 (12/07)

915-9727

Daytime Phone •

4. Farth mhor		Applied For	
* <i>: : : : : : : : : : : : : : : : : : :</i>	D	Not Applicable	
5. Certificate of Status Desire		. \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

BEKIEMPIS, VINCENT 2901 W. BUSCH BOULEVARD #901 TAMPA, FL 33618

11. I hereby certify that the info indicated on this report is

SIGNATURE:

limited liability company

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_	itoris di registeras agenti.			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			
NAME STREET ADDRESS CITY-S1-ZIP	MGR BEKIEMPIS, VINCENT 2901 W. BUSCH BOULEVARD, #901 TAMPA, FL 33618			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP		DO NO	T WRITE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN THIS	SPACE	
THLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-7IP				

IGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

th his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information of that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the empowered to execute this report as required by Chapter 608, Florida Statutes.

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 familiar with, and accept