2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000103099

Entity Name: WILDWOOD GOLF OPERATIONS, LLC

US

FILED Sep 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3870 COASTAL HIGHWAY CRAWFORDVILLE, FL 32327

Current Mailing Address: New Mailing Address:

P.O. BOX 1570

CRAWFORDVILLE, FL 32326 US

FEI Number: 20-3654761 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LENTZ, JOHN W VII BARRY, JOE

3870 COASTAL HIGHWAY 177 LONESOME ROAD

CRAWFORDVILLE, FL 32327 US CRAWFORDVILLE, FL 32327 US

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: JOE BARRY 09/17/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: G () Delete Title: () Change () Addition

 Name:
 ESSER, RANDY
 Name:

 Address:
 3870 COASTAL HWY
 Address:

 City-St-Zip:
 CRAWFORDVILLE, FL 32327
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 THOMPSON, GERALD
 Name:

 Address:
 1136 MCCOOK RD
 Address:

 City-St-Zip:
 QUINCY, FL 32351
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: HARVEY, DAVID Name: HARVEY, RHONDA

Address: 117 HARVEY-YOUNG FARM RD Address: 117 HARVEY-YOUNG FARM RD City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: CRAWFORDVILLE, FL 32327

Title: MGRM () Delete Title: () Change () Addition

 Name:
 BARRY, JOE
 Name:

 Address:
 177 LONESOME RD
 Address:

 City-St-Zip:
 CRAWFORDVILLE, FL 32327
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOE BARRY MGRM 09/17/2007