

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011727

Entity Name: TILIA GOLF(USA), LLC

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

3412 CLARK RD
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

3412 CLARK RD
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 20-4239606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, JEROME S ESQ.
1680 FRUITVILLE ROAD
SUITE 102
SARASOTA, FL 34236 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: MGR () Delete
Name: SHIPMAN, MALCOLM
Address: 3412 CLARK RD
City-St-Zip: SARASOTA, FL 34231 US

Title: MGR () Delete
Name: AKERS, DENNIS L
Address: 3412 CLARK ROAD
City-St-Zip: SARASOTA, FL 34231 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHIPMAN, MALCOLM
Address: 3412 CLARK RD
City-St-Zip: SARASOTA, FL 34231 US

Title: MGRM (X) Change () Addition
Name: AKERS, DENNIS L
Address: 3412 CLARK ROAD
City-St-Zip: SARASOTA, FL 34231 US

Title: MGRM () Change (X) Addition
Name: DAVID, SEAMAN
Address: 2401 CARDWELL WAY
City-St-Zip: SARASOTA, FL 34231 US

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: DENNIS AKERS

MGRM

03/17/2009

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