2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# L06000089830

Entity Name: EXUMA CLUB, LLC

Current Principal Place of Business:

C/O RUSSEL POST PROPERTIES, INC.
35 OCEAN REEF DRIVE, SUITE 120
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

C/O RUSSEL POST PROPERTIES, INC.
35 OCEAN REEF DRIVE, SUITE 120
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 20-5541124 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPCO, INC.
2699 S. BAYSHORE DRIVE 7TH FLOOR
MIAMI, FL 33133 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: POST, RUSSELL
Address: 35 OCEAN REEF DRIVE, SUITE 120
City-St-Zip: KEY LARGO, FL 33037

Title: MGR ( ) Delete
Name: LEE, JOHN
Address: 35 OCEAN REEF DRIVE, SUITE 120
City-St-Zip: KEY LARGO, FL 33037

Title: MGR ( ) Delete
Name: STOVER, BILL
Address: 35 OCEAN REEF DRIVE, SUITE 120
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: RUSSELL POST MGR 04/29/2008

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