

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104490

Entity Name: VILLAGOLF EUROPE LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

3175 W 80TH ST
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

3175 W 80TH ST
HIALEAH, FL 33018

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, ALFONSO
2828 CORAL WAY
300
CORAL GABLES, FL 33145 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: MARTINEZ, LUIS M
Address: 3175 W 80TH ST
City-St-Zip: HIALEAH, FL 33018

Title: MGR () Delete
Name: MARTINEZ, FERNANDO E
Address: 3175 W 80TH ST
City-St-Zip: HIALEAH, FL 33018

Title: MGR () Delete
Name: EIZAGAEACHEVARRIA, JUAN A
Address: 3175 W 80TH ST
City-St-Zip: HIALEAH, FL 33018

Title: MGR () Delete
Name: EIZAGAEACHEVARRIA, JOSE M
Address: 3175 W 80TH ST
City-St-Zip: HIALEAH, FL 33018

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:

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: MARTINEZ LUIS M

MGR

04/30/2007

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