

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000030843

**FILED**  
**Jan 23, 2010**  
**Secretary of State**

**Entity Name:** CLASSIC GOLF INTERNATIONAL, LLC

**Current Principal Place of Business:**

733 NW SPRUCE RIDGE DRIVE  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 59  
PORT SALERNO, FL 34992

**New Mailing Address:**

733 NW SPRUCE RIDGE DRIVE  
STUART, FL 34994

**FEI Number:** 20-8667148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

G & G ACCOUNTING SERVICES, LLC  
6526 SOUTH KANNER HWY PMB #274  
STUART, FL 34997 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:** MGRM  
**Name:** BROWN, ELLIS E II  
**Address:** 733 NW SPRUCE RIDGE DRIVE  
**City-St-Zip:** STUART, FL 34994

**Title:** MGRM  
**Name:** LECLERC, CHRISTOPHE  
**Address:** 9103 SW 78TH PLACE  
**City-St-Zip:** MIAMI, FL 33156

I hereby 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:** ELLIS BROWN

MGRM

01/23/2010

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