2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051537

Entity Name: TOMKO PROFESSIONAL GOLF, LLC

FILED Apr 14, 2009 Secretary of State

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

2643 WYNDSOR OAKS WAY 2054 SOUTHERN DUNES BLVD WINTER HAVEN, FL 33884

HAINES CITY, FL 33844

Current Mailing Address: New Mailing Address:

2643 WYNDSOR OAKS WAY 2054 SOUTHERN DUNES BLVD WINTER HAVEN, FL 33884 HAINES CITY, FL 33844

FEI Number: 26-0206271 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:

BRINSON, J. KEMP 255 MAGNOLIA AVENUE SW WINTER HAVEN, FL 33880 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: (X) Change () Addition () Delete TOMKO, DUANE J TOMKO, DUANE J Name: Name:

Address: 2643 WYNDSOR OAKS WAY Address: 2054 SOUTHERN DUNES BLVD City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: HAINES CITY, FL 33844

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

Name: TOMKO, DAVID Name: TOMKO, DAVID

Address: 2643 WYNDSOR OAKS WAY Address: 2054 SOUTHERN DUNES BLVD City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: HAINES CITY, FL 33844

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: DUANE TOMKO 04/14/2009