

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067164

FILED
May 03, 2010
Secretary of State

Entity Name: GARY GILCHRIST GOLF ACADEMY, LLC

Current Principal Place of Business:

10400 COUNTY ROAD 48
HOWEY-IN-THE-HILLS, FL 34737 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 95
HOWEY-IN-THE-HILLS, FL 34737

New Mailing Address:

FEI Number: 61-1548439 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEEANNE GILCHRIST
10400 COUNTY ROAD 48
HOWEY-IN-THE-HILLS, FL 34737 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:

Title: MGRM
Name: GILCHRIST, LEEANNE
Address: 10400 COUNTY ROAD 48
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737 US

Title: MGRM
Name: GILCHRIST, GARY
Address: 10400 COUNTY ROAD 48
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737 US

Title: MGRM
Name: SUMMERS, ANDREW
Address: 3 CASTLEBRIDGE CT
City-St-Zip: HILTON HEAD ISLAND, SC 29928

Title: MGRM
Name: MEYER, WILLIAM
Address: 12132 SE 15TH
City-St-Zip: BELLEVUE, WA 98005

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: GARY GILCHRIST

MGRM

05/03/2010

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