

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000109595

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** AMERICAN CLASSIC GOLF INSTITUTE LLC

**Current Principal Place of Business:**

350 PELICAN BAY DR  
DAYTONA BEACH, FL 32119

**New Principal Place of Business:**

**Current Mailing Address:**

2947 S. ATLANTIC AVE, # 1103  
DAYTONA BEACH, FL 32118

**New Mailing Address:**

350 PELICAN BAY DR  
DAYTONA BEACH, FL 32119

**FEI Number:** 27-3398719

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SYMMONDS, JEFF  
301 CINNAMON DR  
SATELLITE BEACH, FL 32937 US

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

JLJ ACCTG & TAX SVCS LLC  
90 BRONSON LANE  
PALM COAST, FL 32137 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:** JOSE O LALOG JR

04/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CHOE, WAN K  
**Address:** 2947 S. ATLANTIC AVE #1103  
**City-St-Zip:** DAYTONA BEACH, FL 32118

**Title:** MGRM  
**Name:** KIM, KIL J  
**Address:** 2947 S. ATLANTIC AVE #1103  
**City-St-Zip:** DAYTONA BEACH, FL 32118

**Title:** MGRM  
**Name:** TORRES, AVELINA  
**Address:** 27 N CLOVERDALE COURT  
**City-St-Zip:** PALM COAST, FL 32137

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:** WAN K CHOE

MGRM

04/27/2011

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