

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000351

FILED
Feb 03, 2009
Secretary of State

Entity Name: THE CLUB ESTATES, LLC

Current Principal Place of Business:

4443 CLUB ESTATES DRIVE
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 397
1297 N. LEWIS STREET
GLENVILLE, WV 263510397

New Mailing Address:

FEI Number: 59-3390947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OATES, MARC F P.A.
5515 BRYSON DRIVE
SUITE 502
NAPLES, FL 34109 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 () Delete
Name: MORRIS, IKE L
Address: 1297 N. LEWIS STREET, P.O. BOX 397
City-St-Zip: GLENVILLE, WV 26351

Title: MGRM () Delete
Name: THE CLUB ESTATES OF, MICHIGAN, LLC
Address: 839 NORTH ROCHESTER RD.
City-St-Zip: CLAWSON, MI 48017

ADDITIONS/CHANGES:

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: I. L. MORRIS

MGR

02/03/2009

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