2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 10, 2007
Secretary of State

DOCUMENT# L98000000368

Entity Name: THE GOLF SHOW, LLC

Current Principal Place of Business:

6537 BURNHAM CIRCLE
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

BOX 1424
PONTE VEDRA BEACH, FL 320004

New Mailing Address:

FEI Number: 59-3558001 **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:

BISSELL, KATHLENE
6537 BURNHAM CIRCLE
PONTE VEDRA BEACH, FL 32082 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:	MGR	( ) Delete
Name:	BISSELL, KATHLENE	
Address:	P.O. BOX 1424	
City-St-Zip:	PONTE VEDRA BEACH, FL 32004	
Title:	MGR	( ) Delete
Name:	DIEHL, TERRY	
Address:	% PGA TOUR SAWGRASS	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	MGR	( ) Delete
Name:	COUPLES, FRED	
Address:	% PGA TOUR SAWGRASS	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	MGR	( ) Delete
Name:	PURTZER, TOM	
Address:	% PGA TOUR SAWGRASS	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	MGR	( ) Delete
Name:	MORGAN, GIL	
Address:	% PGA TOUR SAWGRASS	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: KATHLENE BISSELL MGR 09/10/2007

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