2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003889

Entity Name: EDWIN WATTS GOLF SHOPS, LLC

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 20 HILL AVE., N.W FORT WALTÓN BEACH, FL 32548 **Current Mailing Address: New Mailing Address:** 20 HILL AVE., N.W FORT WALTÓN BEACH, FL 32548 FEI Number: 20-0415356 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: WATTS, JAMES R 20 HILL AVE., N.W. FORT WALTON BEACH, FL 32548 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/MEMBERS: ADDITIONS/CHANGES: MGRM Title: MGRM () Delete (X) Change () Addition WATTS, THOMAS E MR EDWIN WATTS HOLDING, CO Name: Name: 20 HILL AVE., N.W. Address: 20 HILL AVE., N.W. Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548 US Title: Title: MGRM () Change (X) Addition () Delete Name: WATTS, JAMES R MR Name: Address: Address: 20 HILL AVE City-St-Zip: City-St-Zip: FT WALTON BEACH, FL 32548 US Title: () Delete Title: MGRM () Change (X) Addition TENER, JAMES R MR Name: Name: 8605 JOHN CARPENTER FWY Address: Address: City-St-Zip: City-St-Zip: DALLAS, TX 75247 US Title: () Delete Title: MGRM () Change (X) Addition Name: Name: FORTIN, JASON B MR. Address: Address: 390 PARK AVE City-St-Zip: City-St-Zip: NEW YORK, NY 10022 US Title: () Delete Title: MGRM () Change (X) Addition FELDMAN, GREG MR Name: Name: 390 PARK AVE Address: Address: City-St-Zip: City-St-Zip: NEW YORK, NY 10022 US Title: () Delete Title: () Change (X) Addition O'TOOLE, MATTHEW H MR Name: Name: Address: Address: 3500 DE MEISONNEUVE BLVD WEST STE 800 WESTMOUNT QUEBEC CANADA, QB H3Z3C1 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS EDWIN WATTS MR 04/18/2005