2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003889

Entity Name: EDWIN WATTS GOLF SHOPS, LLC

FILED Mar 24, 2008 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 WALTON 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/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WATTS, THOMAS E MR Name: Name: 20 HILL AVE., N.W. Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32548 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition WATTS, JAMES R MR Name: WATTS, JOHN MR Name: Address: 20 HILL AVE Address: 20 HILL AVE City-St-Zip: FT WALTON BEACH, FL 32548 US City-St-Zip: FT WALTON BEACH, FL 32548 US Title: MGRM () Delete Title: MGRM (X) Change () Addition TENER, JAMES R MR KESSLER, SVEN MR Name: Name: Address: 8605 JOHN CARPENTER FWY Address: 20 HILL AVENUE City-St-Zip: DALLAS, TX 75247 US City-St-Zip: FORT WALTON BEACH, FL 32548 US Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: FORTIN, JASON B MR. Name: MICHAEL, CUNNINGHAM MR. Address: 390 PARK AVE Address: 20 HILL AVENUE FORT WALTON BEACH, FL 32548 US City-St-Zip: NEW YORK, NY 10022 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition FELDMAN, GREG MR WATSON, JOHN X MR Name: Name: 390 PARK AVE Address: Address: 20 HILL AVENUE City-St-Zip: NEW YORK, NY 10022 US City-St-Zip: FORT WALTON BEACH, FL 32548 US Title: (X) Delete Title: () Change () Addition O'TOOLE, MATTHEW H MR Name: Name: Address: 3500 DE MEISONNEUVE BLVD WEST STE 800 Address: 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 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: MICHAEL CUNNINGHAM MR 03/24/2008