

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000708

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: RESORTS & CHARTED COURSES, LLC

**Current Principal Place of Business:**

240 CENTRAL PARK SOUTH SUITE 11N  
NEW YORK, NY 100191413

**New Principal Place of Business:**

240 CENTRAL PARK SOUTH - SUITE 11N  
NEW YORK, NY 10019 US

**Current Mailing Address:**

240 CENTRAL PARK SOUTH SUITE 11N  
NEW YORK, NY 100191413

**New Mailing Address:**

2000 SOUTH OCEAN DRIVE  
SUITE 509  
FORT LAUDERDALE, FL 33316 US

FEI Number: 22-3892220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MASSIE, SALLIE  
915 OCEAN SHORE BLVD STE 603  
ORMOND BEACH, FL 32176 US

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

MASSIE, SALLIE  
2000 SOUTH OCEAN DRIVE  
SUITE 509  
FORT LAUDERDALE, FL 33316 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:

01/09/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MASSIE, SALLIE  
Address: 240 CENTRAL PARK SOUTH SUITE 11N  
City-St-Zip: NEW YORK, NY 100191413

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MASSIE, SALLIE  
Address: 240 CENTRAL PARK SOUTH - SUITE 11N  
City-St-Zip: NEW YORK, NY 10019

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: SALLIE MASSIE

PRES

01/09/2008

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