

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002036

Entity Name: CFC GOLF VENTURES LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

8480 EAST ORCHARD ROAD, SUITE 6200
GREENWOOD VILLAGE, CO 801115029

New Principal Place of Business:

Current Mailing Address:

6300 PASADENA POINT BLVD., SO.
GULFPORT, FL 33707 US

New Mailing Address:

FEI Number: 20-1157171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYER, JOSEPH B
12971 FARMINGTON TRAIL
SEMINOLE, FL 33776 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: FAIRWAY HOLDINGS LIMITED LIABILITY COMPANY
Address: 475 17TH STREET, SUITE 1390
City-St-Zip: DENVER, CO 80202

Title: MGRM () Delete
Name: MDXA DEVELOPMENT LLC
Address: 8480 EAST ORCHARD ROAD, SUITE 6200
City-St-Zip: GREENWOOD VILLAGE, CO 801115029

Title: MGRM () Delete
Name: LEGACY GOLF GROUP, LLC
Address: 171 S. JASMINE STREET
City-St-Zip: DENVER, CO 80224

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:

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: DONALD B. GRAVETTE

MGRM

04/29/2009

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