

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M06000004900

1. Entity Name

CENTURY GOLF PARTNERS GP LLC



Principal Place of Business

5080 SPECTRUM DRIVE, SUITE 1000 EAST
ADDISON, TX 75001

Mailing Address

5080 SPECTRUM DRIVE, SUITE 1000 EAST
ADDISON, TX 75001

DO NOT WRITE IN THIS SPACE



01162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

20-3659004

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

BK

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME HINCKLEY, JAMES M
STREET ADDRESS 5080 SPECTRUM DRIVE, SUITE 1000 EAST
CITY-ST-ZIP ADDISON, TX 75001

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300101619223
05/04/07--01052--012 **\$50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-23-07

Date

972-386-1648

Daytime Phone #

James M. Hinckley, manager