

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000001156

FILED
Feb 20, 2012
Secretary of State

Entity Name: CNL INCOME TRADITIONAL GOLF I, LLC

Current Principal Place of Business:

450 S ORANGE AVE
ORLANDO, FL 328013336

New Principal Place of Business:

Current Mailing Address:

PO BOX 4920 ATTN: LEGAL COMPLIANCE
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 26-1916259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARCELLI, LINDA A
450 S ORANGE AVE
ORLANDO, FL 328013336 US

Name and Address of New Registered Agent:

PATTERSON, AMY J
450 S ORANGE AVE
ORLANDO, FL 328013336 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: AMY J. PATTERSON

02/20/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: JOHNSON, JOSEPH T
Address: 450 S ORANGE AVE
City-St-Zip: ORLANDO, FL 328013336

Title: MGR
Name: YESTER, SHARON A
Address: 450 S ORANGE AVE
City-St-Zip: ORLANDO, FL 328013336

Title: MGR
Name: GREER, HOLLY
Address: 450 S ORANGE AVE
City-St-Zip: ORLANDO, FL 328013336

Title: MGR
Name: ANGELO, BERNARD J
Address: 68 S SERVICE RD - STE 120
City-St-Zip: MELVILLE, NY 11747

Title: MGR
Name: WONG, TONY
Address: 68 S SERVICE RD - STE 120
City-St-Zip: MELVILLE, NY 11747

I hereby 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: JOSEPH T. JOHNSON

MGR

02/20/2012

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