


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 APR -7 PM 2:22

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company DOCUMENT # M97000000144 WALTER T. MORGAN GOLF ENTERPRISES, LLC 136 GOVERNORS ROAD PONTE VEDRA BEACH FL 32082
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1a. Principal Place of Business Address 136 GOVERNORS ROAD PONTE VEDRA BEACH FL 32082

2 Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

3. Date Organized or Qualified 03/20/1997	3a. State of Formation NC
4. FEI Number 56-1952090	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report 04/10/1998	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent BARTLETT, BARON L P.A. 50 HIGHWAY 11A, SUITE 103 PONTE VEDRA BEACH FL 32082
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8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 200002934062 City 04/03/99 01002-009 ****188.75 ****188.75 Zip Code FL
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when changing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	MORGAN, GERALDINE T	136 GOVERNORS ROAD	PONTE VEDRA BEACH FL
MBR	MORGAN, GERALDINE T	136 GOVERNORS ROAD	PONTE VEDRA BEACH FL
MBR	MORGAN, WALTER T	136 GOVERNORS ROAD	PONTE VEDRA BEACH FL

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *Walter T Morgan* *March 17, 1999* *904280-2116*
SIGNATURE AND TITLE OF REGISTERED AGENT OR DESIGNATED MANAGER REQUIRED FOR FILING