File on or before May 1, 1998 or Limited Liability Company will be subject to a $ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 MAY -4 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE $ 188.75

Annual Report $100.00 + $88.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company

DOCUMENT # M97000000596

TROON GOLF, L.L.C.
8711 EAST PINNACLE PARK ROAD, D-103
SCOTTSDALE AZ 85255

1a. Principal Place of Business Address

Troon Golf
16100 N. Greenway Hayden Loop
Suite 200
Scottsdale, AZ 85260

2. Principal Place of Business

16100 N. Greenway Hayden Loop
Suite, Apt. #, etc.
Suite 200
City & State
Scottsdale, AZ
Zip: 85260
Country: Maricopa

2a. Mailing Address

(Same as 2)
Suite, Apt. #, etc.
City & State
Zip
Country

09/15/1997 DE

4. FEI Number

☑ Applied For
☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired
$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

8. Name and Address of New Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
FL
Zip Code

600002513636--1
-05/06/98--01074--010
****188.75 ****188.75

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 reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	STARWOOD CAPITAL GRO,	3 PICKWICK PLAZA, #250	GREENWICH CT
MGRM	GARMANY, DANA	8711 EAST PINNACLE PARK RO	SCOTTSDALE AZ

ENTERED

11. 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: _____ 4/20/98 (602) 606-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #