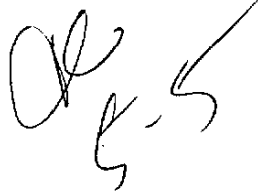
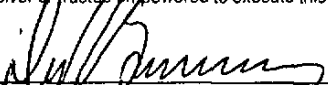


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
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	2a. Mailing Address	09/15/1997	DE
16100 N. Greenway Hayden Loop Suite, Apt. #, etc. Suite 200 City & State Scottsdale, AZ Zip 85260	(Same as 2) Suite, Apt. #, etc. City & State Maricopa	4. FEI Number	☒ Applied For ☐ Not Applicable
Country	Country	5. Date of Last Report	6. Certificate of Status Desired \$0.75 Additional Fee Required ☐
Maricopa			
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code	
		600002513636 -05/06/98--01074--010 ****188.75 ****188.75 FL	
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 TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date Daytime Phone #	