2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021589

Entity Name: TROON PUERTO RICO, INC.

FILED Apr 10, 2009 Secretary of State

Entity Nai	me: TROON F	PUERTO RICO, INC.				
Current P	rincipal Place	of Business:	New Principal Place of Business:			
	SCOTTSDALE DALE, AZ 8525					
Current Mailing Address:			New Maili	New Mailing Address:		
	SCOTTSDALE DALE, AZ 8525					
FEI Number: 86-0994996 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
1200 S. PI PLANTATI The above in the State	e of Florida.). US	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATU		ic Signature of Registered Age	ont		Data	
Election Car		ic Signature of Registered Age 1 Trust Fund Contribution ().	aur		Date	
		,				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	SCHANTZ, TÌM	TSDALE RD., STE. 300	Title: Name: Address: City-St-Zip:	SCHANTZ, TI	OTTSDALE RD., STE. 300	
Title: Name: Address: City-St-Zip:	GARMANY, DAI	TSDALE RD., STE. 300	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	HINTON, HUD	Delete TSDALE RD., STE. 300 AZ 85254	Title: Name: Address: City-St-Zip:	HINTON, HUE	OTTSDALE RD., STE. 300	
Title: Name: Address: City-St-Zip:	ENGLE, RUTH	rsdale road, suite 300	Title: Name: Address: City-St-Zip:	ENGLE, RUT	OTTSDALE ROAD, SUITE 300	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	MICHELSON,	OTTSDALE ROAD, SUITE 300	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY S SCHANTZ EVP 04/10/2009