2007 FOR PROFIT CORPORATION

ANNUAL REPORT FILED Apr 02, 2007 08:00 AM Secretary of State **DOCUMENT # P95000049334** ROSEDALE GOLF HOLDINGS, INC. Mailing Address Principal Place of Business 5100 87TH ST EAST 5100 87TH ST EAST BRADENTON, FL 34211 US BRADENTON, FL 34211 No Chg-P CR2E034 (11/05) 03212007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0751544 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOGAN, PATRICK DO NOT WRITE 5100 87TH ST EAST BRADENTON, FL 34211 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE HUNT, ROBERT A NAME 5100 87TH ST EAST STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34211 U00000684553 04/06/07-80038-004 150.00 TITLE HOGAN, PATRICK NAME 5100 87TH ST EAST STREET ADDRESS BRADENTON, FL 34211 CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all emprise like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/07

Date

Daytime Phone #