

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000034533

Entity Name: CAPONE GOLF, L.L.C.

Current Principal Place of Business:

8201 SANDPOINT BLVD.
ORLANDO, FL 32819

Current Mailing Address:

PO BOX 691242
ORLANDO, FL 32869

FEI Number: 27-1234256

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPONE, MICHAEL V
8201 SANDPOINT BLVD
ORLANDO, FL 32819 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name CAPONE, MICHAEL V
Address PO BOX 691242
City-State-Zip: ORLANDO FL 32869

Title MGR
Name CAPONE, SHAIN K
Address PO BOX 691242
City-State-Zip: ORLANDO FL 32869

I hereby 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 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL V CAPONE

MANAGER

02/27/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date