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# ANNUAL REPORT

South Dakota State Capitol  
500 E. Capitol Ave  
Pierre, SD 57501-5070  
(605) 773-4845

Domestic Limited Liability Company  
SDCL 47-34A-211; 59-11-24, 24.1

Filing Fee: \$50  
  
Total Fee: \$50

**2017**  
FILING YEAR

Please Type or Print Clearly in Ink  
Please submit one Original  
Make payable to the SECRETARY OF STATE

1. Business ID and Name:

**DL003696**  
BUSINESS ID

**RED ROCK GOLF CLUB, L.L.C.**  
BUSINESS NAME

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address):

Actual Street Address  
**6520 BIRKDALE DR**  
**RAPID CITY, SD 57702-9539**

Mailing Address, if Different from Street Address  
**6520 BIRKDALE DR**  
**RAPID CITY, SD 57701**

4. The South Dakota Registered Agent's Name:

South Dakota law permits the registered agent to be either (a) a noncommercial registered agent, or (b) a commercial registered agent.

(a) The South Dakota Noncommercial Registered Agent's name

Name KEVIN L BUNTROCK

Actual Street Address in this State

**6520 BIRKDALE DR**  
**RAPID CITY, SD 57702**

Mailing Address in this State, if Different from Street Address

**6520 BIRKDALE DR**  
**RAPID CITY, SD 57702**

5. If the LLC is manager-managed, list the names and addresses of its Managers. SDCL 59-11-24. If the LLC is member-managed, this section may be left blank.

Name	Address
<b>KEVIN L BUNTROCK</b>	<b>6520 BIRKDALE DRIVE, RAPID CITY, SD, 57702</b>
<b>DON WARD</b>	<b>6520 BIRKDALE DRIVE, RAPID CITY, SD, 57702</b>

6. Beneficial Owners (optional): A beneficial owner is a person who has or in some manner controls an equity security. Please consult an attorney for legal advice if you have any questions concerning this entry. Any question under this heading is considered a request for legal advice and the secretary of state's office is, by statute, not permitted, to provide legal advice.

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a criminal penalty (SDCL 22-39-36).

03/21/2017  
Dated

\_\_\_\_\_  
Email (Optional)

Tina Elaine Pfister  
Signature of an Authorized Person

Tina Elaine Pfister  
Printed Name