

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080427

**FILED**  
**Apr 16, 2006**  
**Secretary of State**

**Entity Name:** CLUB LAND LLC

**Current Principal Place of Business:**

4646 BLUE PINE CIRCLE  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

**Current Mailing Address:**

4646 BLUE PINE CIRCLE  
LAKE WORTH, FL 33463

**New Mailing Address:**

**FEI Number:** 20-3145818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAP SERVICE CORPORATION  
4800 NORTH FEDERAL HIGHWAY, STE 307B  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

CAP SERVICE CORPORATION  
4800 NORTH FEDERAL HIGHWAY, STE 307B  
307B  
BOCA RATON, FL 33431 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: PATRICK SCHNEIDER

04/16/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCHNEIDER, PATRICK J  
Address: 4646 BLUE PINE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

Title: MGRM ( ) Delete  
Name: SCHNEIDER, CARRAN  
Address: 1433 COUNCIL BLUFF DRIVE  
City-St-Zip: ATLANTA, GA 30345

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: PATRICK SCHNEIDER

MGMB

04/16/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date