

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000100189

Entity Name: MARK LANE GOLF, LLC

Current Principal Place of Business:

704 ST ROSE COVE
NICEVILLE, FL 32578

Current Mailing Address:

P.O. BOX 5264
NICEVILLE, FL 32578 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANE, MARK M
704 ST ROSE COVE
NICEVILLE, FL 32578 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	Title	MANAGER
Name	LANE, MARK M	Name	LANE, SUSAN W
Address	704 ST. ROSE COVE	Address	704 ST ROSE COVE
City-State-Zip:	NICEVILLE FL 32578	City-State-Zip:	NICEVILLE FL 32578

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK M LANE

MSGR

05/01/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date