

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000037747

**FILED**  
**Apr 03, 2018**  
**Secretary of State**  
**CC6319892055**

**Entity Name:** JAMIE FRITH GOLF LLC

**Current Principal Place of Business:**

2916 SW 22ND CIR #20C-2  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

2916 SW 22ND CIR #20C-2  
DELRAY BEACH, FL 33445 US

**FEI Number:** 80-0796122

**Certificate of Status Desired:** No

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

FRITH, JAMIE  
2916 SW 22ND CIR 20C-2  
DELRAY BEACH, FL 33445 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 FRITH, JAMIE  
Address 2916 SW 22ND CIR #20C-2  
City-State-Zip: DELRAY BEACH FL 33445

Title MANAGING MEMBER  
Name FRITH, ANN M  
Address 2916 SW 22ND CIR #20C-2  
City-State-Zip: DELRAY BEACH FL 33445

Title MANAGING MEMBER  
Name FRITH, MATTHEW J  
Address 17315 TANGERINE BLVD  
City-State-Zip: LOXAHATCHEE FL 33470

*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:** JAMIE FRITH

MRG

04/03/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date