## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000129959

Entity Name: LOST CAVERNS ADVENTURE GOLF, LLC

**Current Principal Place of Business:** 

6312 INTERNATIONAL DR. ORLANDO. FL 32819

**Current Mailing Address:** 

7540 CANADA AVE. ORLANDO, FL 32819

FEI Number: 46-1189612 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DOWDY, RONALD EJR. 7540 CANADA AVE. 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

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name DOWDY, RONALD EJR. Name DOWDY, MEGAN E

Address 7540 CANADA AVE. Address 536 LAKE COVE POINTE CIR.

City-State-Zip: ORLANDO FL 32819 City-State-Zip: WINTER GARDEN FL 34787

Title MGRM

Name FULCHER, NICHOLAS S
Address 1891 TWIN LAKE DR.
City-State-Zip: GOTHA FL 34734

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: RONALD E. DOWDY, JR.

MANAGING MEMBER

03/18/2013

Date

FILED Mar 18, 2013

**Secretary of State** 

CC2464238949

Electronic Signature of Signing Authorized Person(s) Detail

Date