2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000000477

FRANKLIN GOLF MANAGEMENT, LLC



FILED Mar 19, 2003 8:00 am Secretary of State 03-19-2003 90043 027 ****55.00

Principal Place of Business		Mailing Address	Mailing Address					
6401 CONGRESS AVE SUITE 270 BOCA RATON FL 33487		6401 CONGRESS AVE., SI BOCA RATON FL 33487	6401 CONGRESS AVE., SUITE 270 BOCA RATON FL 33487					
						1841 B. A. B.		
2. Principal Place of Business .		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State	City & State		4. FEI Num	nber 65-0985869		pplied For ot Applicable
Zip	Country	Zip	Zip Counti		5. Certifica	ate of Status Desired .	\$5.00 Ad Fee Require	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
HORN, DEAN				Name				
	IN, DEAN I CONGRESS AVE., SUITE 270		Street Addre		s (P.O. Box Number is Not Acceptable)			
вос	A RATON FL 33487	·						
:			City			FL	Zip Coo	de
8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
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	•	Make Check Payab		FEE IS \$50.00				
				ay 1, 2003	ient of State			
•	MANUSCINIO MENT					ADDITIONS (CHANGES		
9.	MANAGING MEMI	BERS/MANAGERS	10. TITLI			ADDITIONS/CHANGES	☐ Change	Addition
TITLE NAME	VALASSIS, D. CRAIG	☐ Defete	NAM				☐ Change	LF Addition
STREET ADDRESS	6401 CONGRESS AVE., STE 2	Σ7 0		ET ADDRESS				Í
CITY-ST-ZIP	BOCA RATON FL 33487	-10		-ST-ZIP				
TITLE	MGRM	☐ Delete	TITLE	<u> </u>		·	Change	Addition
NAME	HORN, DEAN B		NAM	Ε				_
STREET ADDRESS	6401 CONGRESS AVE., STE 2	270	STRE	ET ADDRESS_	en manager	and the same of the same	**	
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STREET ADDRESS	6401 CONGRESS AVE., STE 2	270		ET ADDRESS				ļ
CITY-ST-ZIP	BOCA RATON FL 33487		CITY	-ST-ZIP				
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CITY-ST-ZIP			CITY	-ST-ZIP				
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

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