

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 22, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90213 019 \*\*\*\*50.00

**DOCUMENT #** L00000008849

**1. Entity Name**

HIGHLANDS RIDGE GOLF CLUB, LLC

**DO NOT WRITE IN THIS SPACE**

966183

**2. Principal Place of Business**  
3455 E. Fairway Vista Drive

**3. Mailing Address**  
1275 Lake Heathrow Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**  
Avon Park, FL

**City & State**  
Heathrow, FL

**4. FEI Number**  
59-3659764

**Applied For**  
☐ Not Applicable

**Zip** 33825 **Country** United States

**Zip** 32746 **Country** United States

**5. Certificate of Status Desired** ☐ **\$5.00 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

**Name**  
Alexander, Larry B. Esq.

**Street Address (P.O. Box Number is Not Acceptable)**  
505 South Flagler Drive, Suite 1100

**City** West Palm Beach, **FL** **Zip Code** 33401

**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.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

**DATE**

**FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**DUE BY MAY 1**

**9. MANAGING MEMBERS/MANAGERS**

**TITLE** Member  
**NAME** Sebring Land Limited Partnership  
**STREET ADDRESS** 1275 Lake Heathrow Lane  
**CITY-ST-ZIP** Heathrow, FL 32746

**TITLE** Manager  
**NAME** 27/SSH Corp.  
**STREET ADDRESS** 1275 Lake Heathrow Lane  
**CITY-ST-ZIP** Heathrow, FL 32746

**TITLE** Manager  
**NAME** Dick, Michael T.  
**STREET ADDRESS** 1275 Lake Heathrow Lane  
**CITY-ST-ZIP** Heathrow, FL 32746

**TITLE** Manager  
**NAME** Meseroll, David B.  
**STREET ADDRESS** 2801 S. Clubhouse Blvd.  
**CITY-ST-ZIP** Avon Park, FL 33825

**TITLE**  
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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.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

George P. Apostolicas, Pres. (407) 333-1400 4/30/02

CR2E083B (12/01)