

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000014163

FILED
Apr 01, 2002 8:00 AM
Secretary of State

Entity Name: TOL GOLF WAY CENTER, L.L.C.

Current Principal Place of Business:

1650 PRUDENTIAL DR., STE. 400
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1650 PRUDENTIAL DR., STE. 400
LEGAL DEPT.
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3714411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAINE, LAWRENCE
1650 PRUDENTIAL DR., STE. 400
JACKSONVILLE, FL 32207

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: HENDERSON, ALISON K
Address: 1650 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: REGAN, MICHAEL N
Address: 1650 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR () Change (X) Addition
Name: SHALLEY, MICHAEL J
Address: 1650 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR () Change (X) Addition
Name: SOLOMON, STEPHEN W
Address: 1650 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR () Change (X) Addition
Name: WRIGHT, DAWN H
Address: 1650 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR () Change (X) Addition
Name: SLAPPEY, BRADFORD A
Address: 1650 PRUDENTIAL DRIVE
City-St-Zip: JACKSONVILLE, FL 32207 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: MICHAEL N. REGAN

MGR

04/01/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date