## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L01000017098**

SYNERGY GOLF DEVELOPMENT, LLC



Principal Place of Business

26811 SOUTH BAY DR.

# 350

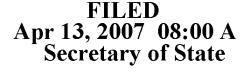
BONITA SPRINGS, FL 34134

Mailing Address

26811 SOUTH BAY DR.

# 350

BONITA SPRINGS, FL 34134





03292007 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (11/05)

4. FEI Number	Applied For	_
56-2287511	Not Applicable	₽
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

ROSINUS, UTE 26811 SOUTH BAY DR.

#350 **BONITA SPRINGS, FL 34134**  DO NOT WRITE IN THIS SPACE

	above named entity submits this statement for the purpose of chabigations of registered agent.	anging its registered office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept
SIGNATI	URE	(NOTE: Registered Agent signature required when reinstating)	DATE
	Filing Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
9. TITLE	MANAGING MEMBERS/MANAGERS		

ROSINUS, UTE NAME STREET ADDRESS 26811 SOUTH BAY DR. SUITE # 350 CITY-ST-ZIP BONITA SPRINGS, FL 34134 TITLE NAME ROSINUS, BJOERN STREET ADDRESS 26811 SOUTH BAY DR. # 350 CITY-ST-7IP BONITA SPRINGS, FL 34134 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME

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DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.

NAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**SIGNATURE:** 

STREET ADDRESS CITY-ST-ZIP