

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000019989
1. Entity Name
SANDPIPER GOLF CENTER, L.L.C.



Principal Place of Business
**9209 COUNTY LINE RD
SPRING HILL, FL 34608**

Mailing Address
**9209 COUNTY LINE RD
SPRING HILL, FL 34608**



02102008 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
59-2921676

Applied For
☒ Not Applicable

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

6. Name and Address of Current Registered Agent
**SAKER, CHARLES
9209 COUNTY LINE RD
SPRING HILL, FL 34608**

7. 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 resigning) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

8. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAKER, CHARLES JR 9209 COUNTY LINE RD SPRING HILL, FL 34608
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02/25/06-80004-022 50.00

11. 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 606, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date **2/13/06** Daytime Phone # _____