

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000001440

1. Entity Name
THE MAJORS AT BAYSIDE LAKES GOLF CLUB, L.L.C.



Principal Place of Business
**3375 BAYSIDE LAKES BLVD.
PALM BAY, FL 32909**

Mailing Address
**3375 BAYSIDE LAKES BLVD.
PALM BAY, FL 32909**



02052007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3053420

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JEFFERIES, BENJAMIN E
770 NORTH DRIVE
SUITE A
MELBOURNE, FL 32934**

**DO NOT WRITE
IN THIS SPACE**

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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	TOWN CENTER PARTNERS, LTD
STREET ADDRESS	770 NORTH DRIVE SUITE A
CITY-ST-ZIP	MELBOURNE, FL 32934
TITLE	MGR
NAME	JEFFERIES, BENJAMIN E
STREET ADDRESS	770 NORTH DRIVE SUITE A
CITY-ST-ZIP	MELBOURNE, FL 32934
TITLE	MGR
NAME	THOMPSON, RONALD
STREET ADDRESS	770 NORTH DRIVE SUITE A
CITY-ST-ZIP	MELBOURNE, FL 32934
TITLE	MGR
NAME	FRAZER, JAMES L
STREET ADDRESS	3375 BAYSIDE LAKES BLVD.
CITY-ST-ZIP	PALM BAY, FL 32909
TITLE	MGR
NAME	BAUER, BRIAN C
STREET ADDRESS	3375 BAYSIDE LAKES BLVD.
CITY-ST-ZIP	PALM BAY, FL 32909
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000639319
02/28/07-80021-012 50.00

**DO NOT WRITE
IN THIS SPACE**

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 608, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

2/15/07

321-952-2414