

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015285

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** LAKELAND COUNTRY CLUB, L.L.C.

**Current Principal Place of Business:**

TWO UNIVERSITY PLAZA, SUITE 402  
HACKENSACK, NJ 07601

**New Principal Place of Business:**

**Current Mailing Address:**

TWO UNIVERSITY PLAZA, SUITE 402  
HACKENSACK, NJ 07601

**New Mailing Address:**

**FEI Number:** 20-0777685      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MIDYETTE, WILLIAM M III ESQ  
225 EAST LEMON STREET, SUITE 300  
LAKELAND, FL 33801 US

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/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MM ( ) Delete  
Name: WOLFER, JOSEPH  
Address: TWO UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ 07601

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: M ( ) Delete  
Name: PILLAR FUNDING LLC,  
Address: 2 UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ 07601

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: M ( ) Delete  
Name: REEL FUNDING INC,  
Address: 2 UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ 07601

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: M ( ) Delete  
Name: J K G FINANCING INC,  
Address: 2 UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ 07601

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: M ( ) Delete  
Name: NESSOR DEVELOPMENT,  
Address: PO BOX 603  
City-St-Zip: NEW YORK, NY 10024

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: M ( ) Delete  
Name: J K G FINANCING INC, DBP  
Address: 2 UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOSEPH WOLFER

MM

05/01/2007

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