2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

9/5/;

Sep 18, 2003 8:00 am Secretary of State

r. Diuty Na	JMENT # L02000 GOLF, L.L.C.	026552			:	09-05-2003 900	066 037 *	***50.00	
Principal Place of Business Mailing Address				····.	1 .	££	0567	71	
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BELLEAIR FL 3	13756	BELLEAIR FL 33756				.,		•	
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2. Principal I	Place of Business	3. Mailing Address		<u></u>			· · · · · · · · · · · · · · · · · · ·	1 × 1	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES					
City & Sta	ite	City & State			4. FEL Number	2/. 27	2 A	pplied For ot Applicable	
Zip Country		Zip	· Zip Countr		5 Cartificate of Status Desired		\$5.00 Ad	ditional	+
	6. Name and Address of Curre	nt Registered Agent	ــــــــــــــــــــــــــــــــــــــ		7. Name and Addres	·	Fee Require	ed	4
				Name					7
124	SSMAN, ALAN S 5 COURT STREET, STE. 102 ARWATER FL 33756			Street Address	(P.O. Box Number is Not	Acceptable)			-
			}	City			Zip Coc		-
R The above	named entity submits this statement	t for the purpose of changing is	ts registers	·	rod agent as both in the	FL	- } `		-
the obliga	tions of registered agent.	r tor the purpose of changing i	ns registere	u onice or registe	red agent, or both, in the	State of Morioa. Tarri	ramilar with	ano accept	
SIGNATURE-	Signature, typed or printed name of registered ag		OTE Sendermen	Agent signature requires		DATE			
_									1
		Make Check Payat Due B	ble to Flo	EE IS \$50.00 rida Departme iber 24, 2003	nt of State				
9.	/	Make Check Payat Due B	ble to Flo ly Septem	rida Departme		DDITIONS/CHANGES			
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Lhereby certify that the information supplied with this filling does not qualify 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 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 HAVE OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHERIZED REPRESENTATIVE

Date