

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019478

Entity Name: ON COURSE, LLC

FILED  
May 14, 2007  
Secretary of State

**Current Principal Place of Business:**

6460 NW 24TH STREET  
SUNRISE, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

6460 NW 24TH STREET  
SUNRISE, FL 33313

**New Mailing Address:**

FEI Number: 04-3760124      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:**

LAWSON, CHERYLINE P  
6460 NW 24TH STREET  
SUNRISE, FL 33313      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:**

Title: MGR ( ) Delete  
Name: FREDRICK, LAWSON  
Address: 6460 NW 24TH STREET  
City-St-Zip: SUNRISE, FL 33313

Title: MGRM ( ) Delete  
Name: BROWN, WILFRED A  
Address: 6460 NW 24TH STREET  
City-St-Zip: SUNRISE, FL 33313

Title: MGRM ( ) Delete  
Name: HENDRICKSON-BROWN, INGA  
Address: 6460 NW 24TH STREET  
City-St-Zip: SUNRISE, FL 33313

Title: MGRM ( ) Delete  
Name: LAWSON, CHERYLINE  
Address: 6460 NW 24TH STREET  
City-St-Zip: SUNRISE, FL 33313

**ADDITIONS/CHANGES:**

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

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

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

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: FREDRICK LAWSON

MR.

05/14/2007

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