2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000087912

1. Entity Name 200 CLUB OF OCALA, LLC



FILED Feb 16, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1716 SOUTHWEST 82ND DRIVE GAINESVILLE, FL 32607

1716 SOUTHWEST 82ND DRIVE GAINESVILLE, FL 32607



DO NOT WRITE IN THIS SPACE

02012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1971319

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KRUEGER, SCOTT 2750 NORTHWEST 43RD STREET SUITE 201 GAINESVILLE, FL 32606

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		
Filing Fee is \$50.00 Due by May 1, 2007		U00000638334 02/27/07-80025-020 50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM ARORA, GANESH 1716 SOUTHWEST 82ND DRIVE GAINESVILLE, FL 32607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE		

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

NAME Street address City+St-Zip

NAME. STREET ADDRESS CITY+ST-ZIP

Shiwani Arora

2/14/10

352-861-4602

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

Date

Deytme Phone ∉