2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR),

FILED May 30, 2006 8:00 am Secretary of State

1. Entity Name						05-01-2006 90036 038 ****50.00				
SOUTH FLORIDA PUTTING GREENS, L.L.C.						05-01-200	06 90036	. 038 ****	°50.00	
Principal Place of Business		Mailing Address			1					
3500 NORTH ANDREWS AVENUE 3500 NORTH ANDREWS AVENUE POMPANO BEACH FL 33064 POMPANO BEACH FL 3306				NUE			18 1118 RICE III	8 14471 tour 19010 ri	IFM W	
2. Principal Place	of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				1st MOORE	CR2E083	3 (10/05)		
City & State		City & State			4. FEI	Number - 194200	4		oplied For of Applicable	
Zip	Country	Zip Coun		ntry	5. Cert	ificate of Status Desired	0	\$5.00 Add Fee Require		
	5. Name and Address of Current	Registered Agent		Name	7. Nam	e and Address of New	Registered	Agent		
NADEL, HOWARD B				EMIL NOAH						
800 CC 420	PORATE DRIVE	:		Street Address 3500	Address (P.O. Box Number is Not Acceptable)					
FORT LAUDERDALE FL 33334				· · · · · · · · · · · · · · · · · · ·						
				City Pom PA		BEAUL	FL	- 3332	364	
8. The above named er/kity 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 Sphetiue, Typhel or provided recome of regratement inputs and blee 4 apphicables. (NOTE Regressived Agents inprovide inequalities required when remoduling). DATE										
FILE NOW!!! FEE IS \$50.00										
Makë Check Paÿable to Florida Departme Due By May 1, 2006						te.				
9.	MANAGING MEMBE	RS/MANAGERS	10.			ADOITION	CHANGES	;		
TITLE MG	ir Jah, emil T jr.	Oelete	TITLI					☐ Change	Addition	
	DO N. ANDREWS AVENUE			ET ADDRESS						
	MPANO BEACH FL 33064		_	- ST- ZIP					C 1480	
TITLE NAME		☐ Delete	TITLI NAM	' i				Change	Addition	
STREET ADDRESS				ET ADDRESS		•				
DITE TO THE PARTY OF THE PARTY		□ Delete	100	- ST-ZIP		 		☐ Change	Addition	
NAME			NAM	£						
STREET ADORESS CITY-ST-ZIP				et adoress -st-zep						
TITLE		☐ Delete	TITL					☐ Change	Addition	
NAME STREET ADDRESS			NAM STRE	ET ADDRESS					ļ	
CITY-ST-71P		·- <u>-</u>		-\$I-ZIP			·			
TITLE		□ Delete	TITLE	1				☐ Change	Addition	
STREET ADDRESS				ET ADORESS						
CITY-S1-ZIP			-	-ST-ZIP				Chance	☐ Addition	
HAME		☐ Delete	TITLI NAM					Change	☐ Addition	
STREET ADORESS			•	ET AOURESS						
11. I bereby certi	fy that the information supplied will	th this tilling does not qualify for		-ST-ZIP kemplions contains	ed in Section	on 119, Florida Statutes	I further ce	rtify that the i	nformation	
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signal re-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 of execute this report as required by Chapter 608, Florida Statutes.										
1. 10) hall to 10.00 2/20/21 asil 267										
SIGNATURE: WWW J WWW SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING MARAGING MEMBER, IMMUGER OF AUTHORIZED REPRESENTATIVE TONG DOUBLE PROPER PROPER A										