


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2008 8:00 am
Secretary of State

04-16-2008 90111 011 ***138.75

DOCUMENT # L07000076551		
1. Entity Name SPRUCE CREEK GOLF, LLC		

Principal Place of Business 2605 SW 33RD STREET, BUILDING #200 C/O HERITAGE MGMT. CORP. OCALA, FL 34478	Mailing Address 2605 SW 33RD STREET, BUILDING #200 C/O HERITAGE MGMT. CORP. OCALA, FL 34478
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30003440

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



03202008 Chg-LLC CR2E083 (12/06)

4. FEI Number 26-0589559	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent KIRKPATRICK, KENNETH B 2605 SW 33RD STREET, BUILDING #200 C/O HERITAGE MGMT. CORP. OCALA, FL 34478		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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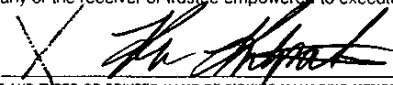
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KIRKPATRICK, KENNETH B P.O. BOX 2495 OCALA, FL 34478 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 	Kenneth Kirkpatrick 3/24/08 352/482-0777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #



HERITAGE
Management Corp.

ATTACHMENT

50003440

Licensed Real Estate Broker

April 15, 2008

Florida Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

Re: Spruce Creek Golf, LLC - L07000076551

To Whom It May Concern:

On March 31, 2008 we issued our check #742 to cover the filing fee for the 2008 Limited Liability Annual Report for the above company. We erroneously sent the check without the annual report.

After talking with personnel in your office, we were advised to file the Annual Report with another check since locating the original check at this time would not be possible.

Therefore, enclosed are the 2008 Annual Report and Check #762 for the filing fee. If you are able to locate the original check, please return it to us at P.O. Box 2495, Ocala, FL 34478.

We apologize for this inconvenience.

Sincerely,

Carol Drouillard

CD:s

