

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000124128

Entity Name: LONE PINE GOLF CLUB, LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6251 N MILITARY TRAIL  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

6251 N MILITARY TRAIL  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

FEI Number: 26-1916536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GERLACH, JOSEPH L  
6251 N MILITARY TRAIL  
WEST PALM BEACH, FL 33407 US

**Name and Address of New Registered Agent:**

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: MGRM  
Name: GERLACH, JOSEPH L  
Address: 14851 BLACK BEAR RD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM  
Name: GERLACH, CHARLES W  
Address: 12170 78TH DR N  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM  
Name: GERLACH, RICHARD J  
Address: 1407 NATURE CT  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby 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: JOSEPH L GERLACH

MGRM

01/05/2012

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