

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 17, 2004 08:00 AM
Secretary of State

DOCUMENT # L97000000889

1. Entity Name
TRADITION GOLF CLUB, L.C.



Principal Place of Business
900 ROYAL PALM BEACH BLVD
ROYAL PALM BEACH, FL 33411

Mailing Address
900 ROYAL PALM BEACH BLVD
ROYAL PALM BEACH, FL 33411

DO NOT WRITE IN THIS SPACE



04212004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
65-0778547

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

8. Name and Address of Current Registered Agent

CARR, DANIEL
900 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

U00000160547
05/17/04-80003-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
CARR, DANIEL
900 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411

TITLE
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CITY - ST - ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

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

Date

Daytime Phone #