

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L99000009163

1. Entity Name
COUNTRY CLUB OF WEST GEORGIA, L.C.



Principal Place of Business
7500 MONTICELLO DRIVE
VILLA RICA, GA 30180

Mailing Address
1035 S SEMORAN BLVD
SUITE 1012
WINTER PARK, FL 32792

07 APR 13 PM 2:15

CLERK OF STATE
TALLAHASSEE, FLORIDA



01092007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3613044

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KETTLE, TARY
1035 S SEMORAN BLVD #1012
WINTER PARK, FL 32792

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
KETTLE, R. TARY
1035 S SEMORAN BLVD #1012
WINTER PARK, FL 32792

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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04/17/07--01035--006 **700.00

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IN THIS SPACE**

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: _____

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

Date

Daytime Phone #

1/15/2007

24/17