

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # M97000000412**

1. Entity Name  
**ARNOLD PALMER GOLF MANAGEMENT LLC**



**FILED**  
03 JUN 20 PM 2:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
6751 FORUM DR, SUITE 200  
ORLANDO, FL 32821

Mailing Address  
6751 FORUM DR, SUITE 200  
ORLANDO, FL 32821

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
5080 Spectrum Drive  
Suite, Apt. #, etc.  
Suite 1050 E

City & State  
Addison, Texas

Zip  
75001

Country

4. FEI Number  
75-2679725

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

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's signature required when reinstating) DATE \_\_\_\_\_

FILE NOW WITH FEE IS \$50.00  
Make Check Payable to Florida Department of State  
Due By May 1, 2003

300021174319  
27/03--01039--009 \*\*50.00

9. MANAGING MEMBERS/MANAGERS

|                                                |                                                                                |                                            |
|------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>NANULA, PETER J<br>6751 FORUM DR, SUITE 200<br>ORLANDO, FL 32821       | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>HALL, HAL R<br>200 CRESCENT COURT, SUITE 1600<br>DALLAS, TX 75240      | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>SMITH, TIMOTHY B<br>200 CRESCENT COURT, SUITE 1600<br>DALLAS, TX 75240 | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>SMITH, TIMOTHY B<br>200 CRESCENT CT., STE. 1600<br>DALLAS, TX 75240    | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>DENIGER, DAVID B<br>200 CRESCENT CT., STE. 1600<br>DALLAS, TX 75240    | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>CRAIG, KYLE<br>397 CLAYTON ST.<br>DENVER, CO 80206                     | <input checked="" type="checkbox"/> Delete |

10. ADDITIONS/CHANGES

|                                                |                                                                                        |                                                                              |
|------------------------------------------------|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>Hoyl, Ron J.<br>5080 Spectrum Drive, Suite 1050 E<br>Addison, Texas 75001      | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>Tierney, Timothy J.<br>6751 Forum Drive, Suite 200<br>Orlando, FL 32821        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>Smith, Timothy B.<br>5080 Spectrum Drive, Suite 1050 E<br>Addison, Texas 75001 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>Deniger, David B.<br>5080 Spectrum Drive, Suite 1050 E<br>Addison, Texas 75001 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>Bartling, John B.<br>5080 Spectrum Drive, Suite 1000 E<br>Addison, Texas 75001 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

11. I hereby certify that the information furnished 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 606, Florida Statutes.

SIGNATURE: Ron J. Hoyl 6-12-03 972-980-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Ron J. Hoyl, MANAGER

CR2E083 (10/02)