

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M980000000696

1. Entity Name
KOLLSTAR TIDES GOLF CLUB LLC

Principal Place of Business
4343 VON KARMAN AVENUE
NEWPORT BEACH CA 92660

Mailing Address
4343 VON KARMAN AVENUE
NEWPORT BEACH CA 92660-2005

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

6. Name and Address of Current Registered Agent
NATIONSCORP REGISTERED AGENTS, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301

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.

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS			10. ADDITIONS/CHANGES		
TITLE	NAME	STREET ADDRESS CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS CITY-ST-ZIP
	MGRM	4343 VON KARMAN AVENUE NEWPORT BEACH CA 92660			

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: William S. Hoffenberg **WILLIAM S. HOFFENBERG**
VICE-PRESIDENT & CFO
Date: 3/15/00 Daytime Phone # _____

FILED *WR 4/5*
00 MAR 27 PM 3:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E083 (9/99)