

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000006610

**Entity Name:** FIVE COURSES, LLC

**Current Principal Place of Business:**

11418 CHEROKEE PLANTATION COURT  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

20600 CHAGRIN BLVD  
SUITE 430  
SHAKER HEIGHTS, OH 44122

**FEI Number:** 27-1738453

**Certificate of Status Desired:** No

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

DAVISON, MALCOLM P  
11418 CHEROKEE PLANTATION COURT  
TALLAHASSEE, FL 32312 US

*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

**Authorized Person(s) Detail :**

Title MGR  
Name DAVISON, MALCOLM P  
Address 11418 CHEROKEE PLANTATION COURT  
City-State-Zip: TALLAHASSEE FL 32312

Title MGR  
Name DAVISON, DAVID I  
Address PO BOX 81043  
City-State-Zip: SEATTLE WA 98108

Title MGR  
Name DAVISON, ENDICOTT P  
Address 218 PLEASANT COVE ROAD  
City-State-Zip: BOOTHBAY ME 04537

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MALCOLM P DAVISON

**MEMBER**

**03/15/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date