

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 30, 2005 8:00 am
Secretary of State

06-13-2005 90320 043 ****50.00

DOCUMENT # 204000066532			
1. Entity Name LAKE DAVIS, LLC			
Principal Place of Business 1923 SANTA ANTILLES ROAD ORLANDO, FL 32806		Mailing Address 1923 SANTA ANTILLES ROAD ORLANDO, FL 32806	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 253-56-3350		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MEIER, GREGORY W ESQ SHUFFIELDLOWMAN 1000 LEGION PLACE, SUITE 1700 ORLANDO, FL 32801		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 signature required when reinstating) DATE _____			
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR KEATON, PEYTON H III 1923 SANTA ANTILLES ROAD ORLANDO, FL 32806 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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: <u>Peyton H Keaton III</u>		5-27-05 (407) 896-0506	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Define Phone #	

"MAILED ON MAY 27, 2005"