

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106135

Entity Name: AIRPORT PARK, LLC

FILED
Jul 02, 2007
Secretary of State

Current Principal Place of Business:

621 N. LAKE PARKER DRIVE
LAKELAND, FL 33801

New Principal Place of Business:

621 N. LAKE PARKER AVENUE
LAKELAND, FL 33801

Current Mailing Address:

PO BOX 95545
LAKELAND, FL 33804

New Mailing Address:

FEI Number: 20-5855754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KEDZUF, JOSEPH P
621 N. LAKE PARKER DRIVE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

KEDZUF, JOSEPH P
621 N. LAKE PARKER AVENUE
LAKELAND, FL 33801 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:

07/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KEDZUF, DEBRA A
Address: 621 N. LAKE PARKER DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KEDZUF, DEBRA A
Address: 621 N. LAKE PARKER AVENUE
City-St-Zip: LAKELAND, FL 33801

Title: M () Change (X) Addition
Name: KEDZUF, JOSEPH P
Address: 621 N. LAKE PARKER AVENUE
City-St-Zip: LAKELAND, FL 33804

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: DEBRA A, KEDZUF

MGRM

07/02/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date