

2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Nov 09, 2011
Secretary of State

DOCUMENT# L06000021700

Entity Name: FEC LAKES, LLC

Current Principal Place of Business:

2855 S. LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134

New Principal Place of Business:

2855 LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

2855 S. LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

2855 LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBB, KOLLEEN
2855 S. LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

COBB, KOLLEEN
2855 LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134 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: _____ 11/09/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MMGR
Name: FECI HOLDING CORP
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VPS
Name: COBB, KOLLEEN
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VPT
Name: GODOY, JUAN
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VP
Name: SWANSON, ERIC
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: P
Name: SIGNORELLO, VINCENT
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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: KOLLEEN O.P. COBB VPS 11/09/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date