

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000010266

**Entity Name:** LAKES EDGE COMMERCIAL PROPERTIES, LLC

**Current Principal Place of Business:**

C/O RESEARCH MANAGEMENT CORP  
901 PONCE DE LEON BLVD SUITE #505  
CORAL GABLES, FL 33134

**Current Mailing Address:**

C/O RESEARCH MANAGEMENT CORP  
901 PONCE DE LEON BLVD SUITE #505  
CORAL GABLES, FL 33134 US

**FEI Number:** 65-1139842

**Certificate of Status Desired:** No

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

SMITH, STEPHEN H  
C/O COMREAL MIAMI, INC  
2335 NW 107TH AVENUE, SUITE 2M02  
DORAL, FL 33172 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 MGRM  
Name CR PARTNERS II, LLC  
Address C/O STEPHEN H SMITH  
4277 INGRAHAM HIGHWAY  
City-State-Zip: MIAMI FL 33133

*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:** CR PARTNERS II

MGRM

04/23/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date