

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000020811

**Entity Name:** LAKE VEC, L.L.C.

**Current Principal Place of Business:**

16369 W COLONIAL DR  
OAKLAND, FL 34787

**Current Mailing Address:**

33040 PROFESSIONAL DRIVE  
LEESBURG, FL 34788 US

**FEI Number:** 02-0681050

**Certificate of Status Desired:** No

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

SWOPE, ELIZABETH  
33040 PROFESSIONAL DRIVE  
LEESBURG, FL 34788 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:** ELIZABETH SWOPE

05/15/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WILLIAM, DOUGLAS PAUL DR.  
Address 16369 W COLONIAL DR  
City-State-Zip: OAKLAND FL 34787

Title MANAGER  
Name MARTIN, JAMES DR.  
Address 16369 W COLONIAL DR  
City-State-Zip: OAKLAND FL 34787

Title MANAGER  
Name RUBINSTEIN, RICHARD DR.  
Address 16369 W COLONIAL DR  
City-State-Zip: OAKLAND FL 34787

Title MANAGER  
Name SCHOLL-MEALEY, ANNE DVM  
Address 16369 W COLONIAL DR  
City-State-Zip: OAKLAND FL 34787

Title MANAGER  
Name MYERS, BERNARD DVM  
Address 16369 W COLONIAL DR  
City-State-Zip: OAKLAND FL 34787

*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:** JAMES MARTIN

MANAGER

05/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date