

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000034633

**Entity Name:** 5115 LAKE LECLARE, LLC

**Current Principal Place of Business:**

5115 LAKE LECLARE ROAD  
LUTZ, FL 33558

**Current Mailing Address:**

5115 LAKE LECLARE ROAD  
LUTZ, FL 33558

**FEI Number:** 20-0216061

**Certificate of Status Desired:** Yes

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

BROWN, RICHARD D  
5115 LAKE LECLARE ROAD  
LUTZ, FL 33558 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 BROWN, RICHARD D  
Address 5115 LAKE LECLARE ROAD  
City-State-Zip: LUTZ FL 33558

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RICHARD D. BROWN

MGRM

03/25/2013

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

\_\_\_\_\_ Date