## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009828

Entity Name: CROWN LAKES, L.L.C.

**Current Principal Place of Business:** 

8902 N DALE MABRY HWY

SUITE 200

TAMPA, FL 33614

## **Current Mailing Address:**

8902 N DALE MABRY HWY SUITE 200 TAMPA, FL 33614 US

FEI Number: 20-0693392 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RICE, MITCHELL F 8902 N DALE MABRY HWY SUITE 200 TAMPA, FL 33614 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: MITCHELL F RICE 03/23/2015

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title

Name RICE, MITCHELL F Name LEEDS, MICHAEL J 8902 N DALE MABRY HWY, SUITE 200 Address PO BOX 274183 Address

TAMPA FL 33688-4183 City-State-Zip: City-State-Zip: TAMPA FL 33614

VΡ Title

Title MGR Name

DWORZANOWSKI, GREG W Name MORTON, MICHAEL

Address 611 W BAY STREET Address 1001 YAMATO ROAD

SUITE G **STE 307** 

City-State-Zip: TAMPA FL 33606 City-State-Zip: BOCA RATON FL 33431

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.

03/23/2015 SIGNATURE: MITCHELL F RICE **MGR** 

**FILED** Mar 23, 2015

**Secretary of State** 

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