

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000071283

**FILED**  
**Jan 21, 2014**  
**Secretary of State**  
**CC6833124059**

**Entity Name:** L&C PROPERTY MANAGEMENT, LLC.

**Current Principal Place of Business:**

539 N MILLS AVE  
ORLANDO, FL 32803

**Current Mailing Address:**

539 N MILLS AVE  
ORLANDO, FL 32803 US

**FEI Number:** 20-3178386

**Certificate of Status Desired:** No

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

CHEW, CHRISTINE  
539 N MILLS AVE  
ORLANDO, FL 32803 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 LYNCH, TSUEI H  
Address 9409 PALM TREE DR  
City-State-Zip: WINDERMERE FL 34786

Title MGRM  
Name CHRISTINE CHEW FAMILY TRUST  
Address 8748 WITTENWOOD COVE  
City-State-Zip: ORLANDO FL 32836

Title MGRM  
Name HONG ZONG CHEW FAMILY TRUST  
Address 8748 WITTENWOOD COVE  
City-State-Zip: ORLANDO FL 32836

*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:** CHRISTINE CHEW

MGRM

01/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date