

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000120563

**Entity Name:** LAKE POINT PHASE I LLC

**Current Principal Place of Business:**

25818 S.W. KANNER HWY.  
CANAL POINT, FL 33438

**FILED**  
**Jan 22, 2020**  
**Secretary of State**  
**7857241048CC**

**Current Mailing Address:**

12012 SOUTH SHORE BLVD  
#107  
WELLINGTON, FL 33414 US

**FEI Number:** 26-1769134

**Certificate of Status Desired:** No

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

FRANCIS JUDSON LAIRD, IV  
12012 SOUTH SHORE BLVD  
#107  
WELLINGTON, FL 33414 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 LAKE POINT HOLDINGS LLC  
Address 12012 SOUTH SHORE BLVD  
#107  
City-State-Zip: WELLINGTON FL 33414

Title MGR  
Name RUSBRIDGE, HAROLD D  
Address 3160 FAIRLANE FARMS ROAD  
City-State-Zip: WELLINGTON FL 33414

Title MGR  
Name LAIRD, FRANCIS JIV  
Address C/O BC PROPERTIES, 4500 BISCAYNE  
BLVD #105  
City-State-Zip: MIAMI FL 33137

*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:** BARBARA OWEN

**CONTROLLER**

**01/22/2020**

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

\_\_\_\_\_  
Date