

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000151809

**Entity Name:** 4062 W LAFAYETTE LLC

**Current Principal Place of Business:**

245 EAST VIRGINIA STREET  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

245 EAST VIRGINIA STREET  
TALLAHASSEE, FL 32301 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LEVINE & STIVERS LLC  
245 EAST VIRGINIA STREET  
TALLAHASSEE, FL 32301 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           MANAGER  
Name           4062 W LAFAYETTE LAND TRUST  
Address        245 EAST VIRGINIA STREET  
City-State-Zip: TALLAHASSEE FL 32301

*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:** TONY FISH

**TRUSTEE**

**04/16/2013**

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

\_\_\_\_\_  
Date