

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000006966

**Entity Name:** LYMAN 5 LLC

**Current Principal Place of Business:**

118 W COMSTOCK AVE  
WINTER PARK, FL 32789

**Current Mailing Address:**

118 W COMSTOCK AVE  
WINTER PARK, FL 32789

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

RESTORE WINTER PARK LLC  
118 W COMSTOCK AVE  
WINTER PARK, FL 32789 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            AMBR  
Name            SKOLFIELD, JOHN T III  
Address        118 W COMSTOCK AVE  
City-State-Zip: WINTER PARK FL 32789

Title            AMBR  
Name            RIZZO, ANTHONY B  
Address        118 W COMSTOCK AVE  
City-State-Zip: WINTER PARK FL 32789

*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:** JOHN T. SKOLFIELD III

AMBR

04/30/2014

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

\_\_\_\_\_  
Date