

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000252574

**Entity Name:** LAKE CROSSING LLC

**Current Principal Place of Business:**

2300 NW CORPORATE BLVD.  
SUITE 135  
BOCA RATON, FL 33431

**Current Mailing Address:**

PO BOX 11229  
KNOXVILLE, TN 37939 US

**FEI Number:** 86-2162533

**Certificate of Status Desired:** No

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

SHAPIRO, MICHAEL B ESQ.  
7777 GLADES ROAD  
SUITE 400  
BOCA RATON, FL 33434 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 MGR  
Name LAKE CROSSING CORPORATE INC.  
Address 2300 NW CORPORATE BLVD., SUITE  
135  
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.*

**SIGNATURE:** STEVEN LEVIN

PRESIDENT, LAKE  
CROSSING CORP INC.  
MANAGER

04/03/2023

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

\_\_\_\_\_  
Date