

**ADD000001308**

Florida Department of State  
Division of Corporations  
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**L. SELLERS**

To:

Division of Corporations  
Fax Number : (850) 617-6383

FEB 22 2010

From:

Account Name : AKERMAN SENTERFITT (ORLANDO)  
Account Number : 076656002425  
Phone : (407) 423-4000  
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**EXAMINER**

254-4269

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

*Susan Barcl*

REGISTERED AGENT CHANGE  
LAKE WILSON INVESTMENT PARTNERSHIP, LTD.

Certificate of Status	0
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**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Lake Wilson Investment Partnership, Ltd.  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 08/22/2000 3. A00000001308  
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Dean Mead Services, LLC  
Name  
800 North Magnolia Ave., Suite 1500  
Address  
Orlando, FL 32803  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

John F. Fischer  
Name  
21742 Lake Seneca Road  
Florida street address (P.O. Box not acceptable)  
Eustis FL 32726  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Lake Wilson Management, LLC

By John F. Fischer

Signature of General Partner

John F. Fischer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

John F. Fischer  
Signature of Registered Agent

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

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