

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAR 28 AM 8:38

DOCUMENT # A97000002030

1. Entity Name
 LAKE PROVIDENCE, LTD.



Principal Place of Business
 707 MENDHAM BLVD, SUITE 201
 ORLANDO, FL 32825

Mailing Address
 707 MENDHAM BLVD. SUITE 201
 ORLANDO, FL 32825

2. Principal Place of Business - No P.O. Box #
 495 N. Keller Rd.

3. Mailing Address
 495 N. Keller Rd.

Suite, Apt. #, etc.
 Ste. 301

Suite, Apt. #, etc.
 Ste. 301

City & State
 Maitland, FL

City & State
 Maitland, FL

Zip
 32751

Country
 USA

Zip
 32751

Country
 USA

02292008 Chg-LP CR2E003 (12/06)

4. FEI Number
 59-3478250

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

VOGT, LOUIS E
 707 MENHAM BLVD, STE 201
 ORLANDO, FL 32825

7. Name and Address of New Registered Agent

Name
 Louis E. Vogt

Street Address (P.O. Box Number is Not Acceptable)

495 N. Keller Rd., Ste. 301

City
 Maitland

FL

Zip Code
 32751

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Louis E. Vogt

3/14/08

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # L06000069629
 NAME BRM LAKE PROVIDENCE, LLC
 STREET ADDRESS 707 MENDHAM BLVD. SUITE 201
 CITY-ST-ZIP ORLANDO, FL 32825

DOCUMENT #
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 CITY-ST-ZIP

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 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 495 N. Keller Rd., Ste. 301
 CITY-ST-ZIP Maitland, FL 32751

STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

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STREET ADDRESS
 CITY-ST-ZIP

500120971715
 03/24/08--01002--018 **500.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Louis E. Vogt

3/14/08

407-478-1290

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE