

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000008159

Entity Name: LAKESIDE CIRCLE, LLC

**FILED**  
**Apr 24, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

3420 STALLION LANE  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

3420 STALLION LANE  
WESTON, FL 33331

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

ACRAC, INC.  
13800 NW 2ND ST  
SUITE 190  
SUNRISE, FL 33325 US

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

ACRAC, INC.  
3420 STALLION LANE  
WESTON, FL 33331 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:

04/24/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COHEN, ALAN  
Address: 3420 STALLION LANE  
City-St-Zip: WESTON, FL 33331

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: ALAN COHEN

MGRM

04/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date