

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000535

Entity Name: LAKEPOINTE SOUTH, LLC

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

8833 PERIMETER PARK BLVD
STE 1004
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

8833 PERIMETER PARK BLVD
STE 1004
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3690197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVERITT & CO., P.A.
8833 PERIMETER PARK BLVD
STE 1004
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JONES, THOMAS F
Address: 105 PLANTATION CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR () Delete
Name: LEE, DAVID E
Address: 2513 WRIGHTSON DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES:

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

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: THOMAS F. JONES

MGR

04/26/2007

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