

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

05 MAR 14 PM 1:26

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # L01000008531

1. Entity Name
WALNUT LAKES, LLC



Principal Place of Business

8310 BIG ACORN CIR
#1001
NAPLES, FL 34119

Mailing Address

8310 BIG ACORN CIR
#1001
NAPLES, FL 34119



01042005No Chg-LLC

CR2E083 (10/03)

3/14

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3743737

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSBOROUGH, KAREN

9920 Bonita Beach Rd, #215
Bonita Springs, FL 34135

**DO NOT WRITE
IN THIS SPACE**

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:

Signature, typed or printed name of registered agent and title if applicable.

Karen Rosborough GAVE
AUTHORIZATION BY PHONE TO

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2005

DATE 3/14/05

FOR EXAM

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SAUNDRY ASSOCIATES INC
8310 BIG ACORN CIR #1001
NAPLES, FL 34119

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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CITY-ST-ZIP

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IN THIS SPACE**

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #