LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 10, 2002 8:00 am Secretary of State

DOCUMENT # L01000016422				O4-10-2002 90017 012 ****50.00		
		<u> </u>				
LAKE	LAND TITLE, LLC					
	DO NOT WRITE	IN THIS S	PACE			
2. Principal Piace of Business 500 S. Florida Avenue		3. Mailing Address 500 S. Florida Avenue				
Suite, Act. #, etc.		Suit êr 80%		DO NOT WRITE IN THIS SPACE		
City & State Lakeland, FL		City & State Lakeland, FL		159-3746528	Applied For Not Applicable	
Zip 33801	Country USA	Zip 33801	Country USA	5. Certificate of Status Desired See Requi		
<u> </u>	(.0011			7. Name and Address of Current Registered Agent		
	DO NOT WI	DITE		L. Clark	-	
			Street Address	(P.O. Box Number is Not Acceptable)		
	IN THIS SP	AUE	500 S. F	lorida Avenue, Suite 800		
			City	land FL Zip Co	ode 801	
				red agent, or both, in the State of Florida.	001	
	Ronald L. Clark, Mana	<i>7</i>				
SIGNATURE .	Signature, typed or printed name of registered against an	nd title if applies the.	· · · · · · · · · · · · · · · · · · ·	DATE	· · · · · · · · · · · · · · · · · · ·	
	MMA	Make Check P	FEE IS \$50.00 byable to Department of DUE BY MAY 1	of State		
9,	MANAGING MEMBER	RS/MANAGERS				
TITLE , NAME	Manager		TIFLE NAME		100	
STREET ADDRESS	Ronald L. Clark	51+0 800	STREET ADDRESS		7	
CITY-ST-ZIP	500 S. Florida Avenu Lakeland, FL 33801	ue, suite 800	CITY-ST-ZIP		200	
TITLE NAME	Lakeland, 11 33001		TITLE		icoc	
STREET ADDRESS	·	•	STREET ADDRESS			
-CITY-ST-ZIP			CITY ST-ZIP	100		
TITLE NAME			TITLE NAME			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CATY-ST-ZIP	DO NOT WRITE		
TITLE			TIRE			
NAME			NAME	IN THIS SPACE		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY ST-ZIP			
TITLE			ante			
NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP		·	CITY-STAZIP			
TITLE			TITLE			
NAME STREET ADDRESS	·	•	NAME STREET ADDRESS			
Crty-ST-ZIP			CITY-ST-ZIP			
11. I hereby indicated limited lia	certify that the information supplied with d on this report is true and accurate and ability company or the receiver or trusted	this filing does not qualify that my signature shall hav empowered to execute th	for the exemption stated in S re the same legal effect as if is report as required by Chai	ection 119.07(3)(i). Florida Statutes. I further certify that the made under oath; that I am a managing member or mana pter 608. Florida Statutes.	e information ager of the	

4/3/02

(863) 647-5337