


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000002887

1. Entity Name
LG CITRUS PARK, LLC



Principal Place of Business
25101 CHAGRIN BLVD. #300
BEACHWOOD, OH 44122

Mailing Address
25101 CHAGRIN BLVD. #300
BEACHWOOD, OH 44122

DO NOT WRITE IN THIS SPACE



04192004No Chg-LLC CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

A.G.C. CO.
200 SOUTH ORANGE AVE.
SUITE 2300
ORLANDO, FL 32801

**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 _____ DATE _____
Signature: Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GOLDBERG, LARRY 25101 CHAGRIN BLVD. #300 BEACHWOOD, OH 44122
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GOLDBERG, JORDAN 25101 CHAGRIN BLVD. #300 BEACHWOOD, OH 44122
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BELL, ERIC 25101 CHAGRIN BLVD. #300 BEACHWOOD, OH 44122
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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05/05 04-80183-023 50.00

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:  **DATE:** 4/27/04 **Daytime Phone #:**

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

Larry Goldberg, manager