

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2007 08:00 A
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



01082007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000757294
05/23/07-80066-002 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GOLDBERG, LARRY
STREET ADDRESS	25101 CHAGRIN BLVD. #300
CITY - ST - ZIP	BEACHWOOD, OH 44122

TITLE	MGR
NAME	GOLDBERG, JORDAN
STREET ADDRESS	25101 CHAGRIN BLVD. #300
CITY - ST - ZIP	BEACHWOOD, OH 44122

TITLE	MGR
NAME	BELL, ERIC
STREET ADDRESS	25101 CHAGRIN BLVD. #300
CITY - ST - ZIP	BEACHWOOD, OH 44122

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: X

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

Date

Daytime Phone #

X 4/27/07