

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000008695

1. Entity Name
FLORIDA INVESTMENTS OF LAKE LAND, LLC



Principal Place of Business
**715 CRESCENT HILLS DRIVE
LAKE LAND, FL 33813**

Mailing Address
**6611 HAYTER DR
LAKE LAND, FL 33813**



04082005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3042816

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PITSIKOULIS, MICHAEL
715 CRESCENT HILLS DRIVE
LAKE LAND, FL 33813**

**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, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
PITSIKOULIS, MICHAEL
715 CRESCENT HILLS DRIVE
LAKE LAND, FL 33813**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
TANNER, JAY M
6611 HAYTER DRIVE
LAKE LAND, FL 33813**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1101000308645
04/16/05-80005-023 50.00

**DO NOT WRITE
IN THIS SPACE**

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 #

JAY M. TANNER

4-11-05

868-660-5591