

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000014781

**FILED**  
**Apr 07, 2010**  
**Secretary of State**

**Entity Name:** LAKEFIELD ENTERPRISES, LLC

**Current Principal Place of Business:**

190 STONEHILL ROAD  
COLTS NECK, NJ 07722 US

**New Principal Place of Business:**

**Current Mailing Address:**

253 CHESHIRE WAY  
NAPLES, FL 34110 US

**New Mailing Address:**

**FEI Number:** 02-0627292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CLASP INC.  
3001 TAMIAMI TRAIL NORTH, 4TH FLOOR  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** HUJSA, HOWARD M  
**Address:** 3001 TAMIAMI TRAIL NORTH, 4TH FLOOR  
**City-St-Zip:** NAPLES, FL 34103 US

**Title:** MS  
**Name:** JENNIFER, LAKEFIELD  
**Address:** 190 STONEHILL ROAD  
**City-St-Zip:** COLTS NECK, NJ 07722 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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:** HOWARD M. HUJSA

MGR

04/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date