

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020575

FILED
Jul 14, 2004
Secretary of State

Entity Name: HISTORIC LAKELAND APARTMENTS, LLC

Current Principal Place of Business:

1400 GRASSLANDS BLVD., APT 9
LAKELAND, FL 33803

New Principal Place of Business:

218 E. PINE STREET
LAKELAND, FL 33801

Current Mailing Address:

1400 GRASSLANDS BLVD., APT 9
LAKELAND, FL 33803

New Mailing Address:

218 E. PINE STREET
LAKELAND, FL 33801

FEI Number: 82-0558701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

MCLAUGHLIN, THOMAS
218 E. PINE STREET
LAKELAND, FL 33801 US

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: THOMAS MCLAUGHLIN

07/14/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MCLAUGHLIN, T. CHRISTOPHER JR
Address: 1400 GRASSLANDS BLVD., APT 9
City-St-Zip: LAKELAND, FL 33803

Title: MEM () Delete
Name: MILLER, COREY J
Address: 1136 AFTON STREET
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: MILLER, COREY J
Address: 1136 AFTON STREET
City-St-Zip: LAKELAND, FL 33803

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS MCLAUGHLIN

MGR

07/14/2004

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