

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90047 036 ****55.00

DOCUMENT # L02000034679

1. Entity Name



LENMAR SHOPPES OF OLD DIXIE, L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

664 Azalea Lane

3. Mailing Address

P.O. Box 4456

Suite, Apt. #, etc.

Suite B

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Vero Beach, Florida

City & State
Vero Beach Florida

4. FEI Number

Applied For
 Not Applicable

Zip
32963

Country
USA

Zip
32964

Country
USA

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Leonard J. Zanca

Street Address (P.O. Box Number is Not Acceptable)

664 Azalea Lane

Suite B

City
Vero Beach

FL

Zip Code
32963

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.

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Leonard J. Zanca
130 Ocean Spray CT, Vero Beach FL
32963

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Marie G. Martin
2502 Leon Avenue
Vero Beach FL 32960

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

CR2E083B (12/02)

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:

Leonard J. Zanca
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2-18-03

772-234-5900

Date

Daytime Phone #