

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001345

FILED
Apr 30, 2008
Secretary of State

Entity Name: LAKESIDE VILLAGE CENTER, LLC

Current Principal Place of Business:

420 S. ORANGE AVE.
STE 1200
ORLANDO, FL 32801

New Principal Place of Business:

7500 COLLEGE PARKWAY
FORT MYERS, FL 33907

Current Mailing Address:

PO BOX 231
ORLANDO, FL 32801

New Mailing Address:

7500 COLLEGE PARKWAY
FORT MYERS, FL 33907

FEI Number: 65-1242768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTIANSEN, PATRICK T ESQ
420 S. ORANGE AVE, ST 420
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

SPREHN, SUSAN
7500 COLLEGE PARKWAY
FORT MYERS, FL 33907 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: SUSAN M. SPREHN

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NAP II INVESTMENT MA, NAGEMENT COMPAN Y, INC.
Address: 420 S. ORANGE AVE. STE 1200
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NAP II INVESTMENT MA, NAGEMENT COMPAN Y, INC.
Address: 7500 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SUSAN M. SPREHN

AS

04/30/2008

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