

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 17, 2009
Secretary of State**

DOCUMENT# L03000001345

Entity Name: LAKESIDE VILLAGE CENTER, LLC

Current Principal Place of Business:

7500 COLLEGE PARKWAY
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

7500 COLLEGE PARKWAY
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-1242768 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPREHN, SUSAN
7500 COLLEGE PARKWAY
FORT MYERS, FL 33907 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 () Delete
Name: NAP II INVESTMENT MA, NAGEMENT COMPAN Y, INC.
Address: 7500 COLLEGE PARKWAY
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES:

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

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: KEVIN P. RILEY

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01/17/2009

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