2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005878

Title:

Name:

Address:

City-St-Zip:

MGRM

() Delete HAGSTROM, STEPHEN R

905 SEDDON COVE WAY

TAMPA, FL 33602

Entity Name: STERLING GROUP LAKELAND, L.L.C.

FILED Apr 15, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2515 DRA	NE FIELD RO D, FL 33811						
Current M	lailing Addres	ss:		New Mailing Address:			
	NE FIELD RO D, FL 33811	AD					
FEI Number:	: 80-0078237	FEI Number Applied For()	FEI Num	ber Not Applicable) ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
CALDWELL, DAVID 2515 DRANE FIELD ROAD LAKELAND, FL 33811 US				MCQUEEN, ROBERT 2515 DRANE FIELD ROAD LAKELAND, FL 33811 US			
The above in the State	named entity e of Florida.	submits this statement for the p	purpose of	changing its req	gistered of	ffice or registered agent, or b	oth
SIGNATURE: ROBERT MCQUEEN						04/15/2008	
	Electror	nic Signature of Registered Age	ent			Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:			
Title: Name: Address: City-St-Zip:	MGRM (HALL, JAMES I 323 EUNICE R LAKELAND, FL	OAD		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (X CALDWELL, D 451 ARCHAIC WINTER HAVE	DRIVE		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (MCQUEEN, RC 3203 BRIDGEF LAKELAND, FL	IELD DR		Title: Name: Address: City-St-Zip:	()	Change () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: ROBERT MCQUEEN **MGRM** 04/15/2008